

## Fill in this information to identify the case:

Debtor name XtraLight Manufacturing, Ltd.United States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXASCase number (if known) 18-31857-H1-11☐ Check if this is an amended filing**Official Form 206Sum**  
**Summary of Assets and Liabilities for Non-Individuals**

12/15

**Part 1: Summary of Assets**1. **Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

1a. **Real property:**  
Copy line 88 from *Schedule A/B*..... \$ 0.00

1b. **Total personal property:**  
Copy line 91A from *Schedule A/B*..... \$ 9,163,065.08

1c. **Total of all property:**  
Copy line 92 from *Schedule A/B*..... \$ 9,163,065.08\*

**Part 2: Summary of Liabilities**

2. **Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)  
Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*..... \$ 5,053,412.00

3. **Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)

3a. **Total claim amounts of priority unsecured claims:**  
Copy the total claims from Part 1 from line 5a of *Schedule E/F*..... \$ 0.00

3b. **Total amount of claims of nonpriority amount of unsecured claims:**  
Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*..... +\$ 16,681,672.98

4. **Total liabilities** .....  
Lines 2 + 3a + 3b \$ 21,735,084.98

\*The Debtor's Lighting Division is estimated to be valued at over \$18 Million and total company value exceeds \$20 Million.

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12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

**Part 1: Cash and cash equivalents****1. Does the debtor have any cash or cash equivalents?**☐ No. Go to Part 2.☒ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of  
debtor's interest**2. Cash on hand**\$600.00**3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account  
number3.1. Comerica Bank (as of 3/31/2018)Checking7694\$22,714.003.2. BBVA Compass Bank (as of 4/11/2018)Checking9152\$95,523.95**4. Other cash equivalents (Identify all)****5. Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$118,837.95**Part 2: Deposits and Prepayments****6. Does the debtor have any deposits or prepayments?**☐ No. Go to Part 3.☒ Yes Fill in the information below.**7. Deposits, including security deposits and utility deposits**

Description, including name of holder of deposit

**8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**

Description, including name of holder of prepayment

Debtor XtraLight Manufacturing, Ltd.  
NameCase number (If known) 18-31857-H1-118.1. Blue Cross Blue Shield \$20,400.008.2. Grand Prairie Amortization \$125,548.428.3. Castle Pines Bond \$3,050.008.4. Castle Pines rent \$2,474.198.5. Castle Pines Supplies \$1,451.398.6. Oakland Park rent \$2,514.518.7. Auburndale \$65.408.8. Blue Cross Blue Shield (Manufacturing Division) \$25,100.008.9. Mike Arnold (Manufacturing Division) \$19,000.009. **Total of Part 2.**

Add lines 7 through 8. Copy the total to line 81.

**\$199,603.91****Part 3: Accounts receivable****10. Does the debtor have any accounts receivable?**☐ No. Go to Part 4.☒ Yes Fill in the information below.**11. Accounts receivable**

11a. 90 days old or less:	<u>1,790,694.68</u>	-	<u>9,100.00</u> = ....	<u>\$1,781,594.68</u>
	face amount		doubtful or uncollectible accounts	

11a. 90 days old or less:	<u>2,304,092.24</u>	-	<u>0.00</u> = ....	<u>\$2,304,092.24</u>
	face amount		doubtful or uncollectible accounts	

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## 12. Total of Part 3.

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$4,085,686.92**Part 4: Investments**

## 13. Does the debtor own any investments?

☐ No. Go to Part 5.☒ Yes Fill in the information below.Valuation method used  
for current valueCurrent value of  
debtor's interest14. Mutual funds or publicly traded stocks not included in Part 1  
Name of fund or stock:14.1. Fidelity Investment Account xxxx4062 (as of 3/31/2018)\$217,953.0015. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture  
Name of entity: % of ownership16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1  
Describe:

## 17. Total of Part 4.

Add lines 14 through 16. Copy the total to line 83.

\$217,953.00**Part 5: Inventory, excluding agriculture assets**

## 18. Does the debtor own any inventory (excluding agriculture assets)?

☐ No. Go to Part 6.☒ Yes Fill in the information below.

General description

Date of the last  
physical inventoryNet book value of  
debtor's interest  
(Where available)Valuation method used  
for current valueCurrent value of  
debtor's interest19. Raw materials  
Raw materials\$0.00\$2,135,217.0020. Work in progress  
Work in progress1/2/2018\$0.00\$30,657.0021. Finished goods, including goods held for resale  
Finished Goods\$0.00\$210,239.00

## 22. Other inventory or supplies

## 23. Total of Part 5.

Add lines 19 through 22. Copy the total to line 84.

\$2,376,113.00

## 24. Is any of the property listed in Part 5 perishable?

☒ No☐ Yes

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25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

☒ No☐ Yes. Book value \_\_\_\_\_ Valuation method \_\_\_\_\_ Current Value \_\_\_\_\_

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

☒ No☐ Yes**Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

☒ No. Go to Part 7.☐ Yes Fill in the information below.**Part 7: Office furniture, fixtures, and equipment; and collectibles**

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

☐ No. Go to Part 8.☒ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39.	Office furniture Computers - See Fixed Asset Schedule attached as Exhibit B39. Manufacturing Division \$2,467 UMS Division \$2,088	\$4,555.00		\$4,555.00
	Furniture & Fixtures - See Fixed Asset Schedule attached as Exhibit B39. Manufacturing Division: \$24,866 UMS Division: \$14,777	\$39,643.00		\$39,643.00
40.	Office fixtures Leasehold Improvements - See Fixed Asset Schedule attached as Exhibit B39. Manufacturing Division	\$147,118.00		\$147,118.00
41.	Office equipment, including all computer equipment and communication systems equipment and software Software - See Fixed Asset Schedule attached as Exhibit B39. Manufacturing Division: \$23,345 UMS Division: \$45,756	\$69,101.00		\$69,101.00
	Trimble Units -See Fixed Asset Schedule attached as Exhibit B39. UMS Division	\$244,727.00		\$244,727.00
42.	Collectibles <i>Examples:</i> Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles			



C  
23.63)



Category Description	Date Acquired	Asset Description	Asset Life (Yrs)	Fully Deprec Date	Cost	State	Sold	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033	2034	2035	2036	2037	2038	2039	2040	2041	2042	2043	2044	2045	2046	2047	2048	2049	2050	2051	2052	2053	2054	2055	2056	2057	2058	2059	2060	2061	2062	2063	2064	2065	2066	2067	2068	2069	2070	2071	2072	2073	2074	2075	2076	2077	2078	2079	2080	2081	2082	2083	2084	2085	2086	2087	2088	2089	2090	2091	2092	2093	2094	2095	2096	2097	2098	2099	2100	2101	2102	2103	2104	2105	2106	2107	2108	2109	2110	2111	2112	2113	2114	2115	2116	2117	2118	2119	2120	2121	2122	2123	2124	2125	2126	2127	2128	2129	2130	2131	2132	2133	2134	2135	2136	2137	2138	2139	2140	2141	2142	2143	2144	2145	2146	2147	2148	2149	2150	2151	2152	2153	2154	2155	2156	2157	2158	2159	2160	2161	2162	2163	2164	2165	2166	2167	2168	2169	2170	2171	2172	2173	2174	2175	2176	2177	2178	2179	2180	2181	2182	2183	2184	2185	2186	2187	2188	2189	2190	2191	2192	2193	2194	2195	2196	2197	2198	2199	2200	2201	2202	2203	2204	2205	2206	2207	2208	2209	2210	2211	2212	2213	2214	2215	2216	2217	2218	2219	2220	2221	2222	2223	2224	2225	2226	2227	2228	2229	2230	2231	2232	2233	2234	2235	2236	2237	2238	2239	2240	2241	2242	2243	2244	2245	2246	2247	2248	2249	2250	2251	2252	2253	2254	2255	2256	2257	2258	2259	2260	2261	2262	2263	2264	2265	2266	2267	2268	2269	2270	2271	2272	2273	2274	2275	2276	2277	2278	2279	2280	2281	2282	2283	2284	2285	2286	2287	2288	2289	2290	2291	2292	2293	2294	2295	2296	2297	2298	2299	2300	2301	2302	2303	2304	2305	2306	2307	2308	2309	2310	2311	2312	2313	2314	2315	2316	2317	2318	2319	2320	2321	2322	2323	2324	2325	2326	2327	2328	2329	2330	2331	2332	2333	2334	2335	2336	2337	2338	2339	2340	2341	2342	2343	2344	2345	2346	2347	2348	2349	2350	2351	2352	2353	2354	2355	2356	2357	2358	2359	2360	2361	2362	2363	2364	2365	2366	2367	2368	2369	2370	2371	2372	2373	2374	2375	2376	2377	2378	2379	2380	2381	2382	2383	2384	2385	2386	2387	2388	2389	2390	2391	2392	2393	2394	2395	2396	2397	2398	2399	2400	2401	2402	2403	2404	2405	2406	2407	2408	2409	2410	2411	2412	2413	2414	2415	2416	2417	2418	2419	2420	2421	2422	2423	2424	2425	2426	2427	2428	2429	2430	2431	2432	2433	2434	2435	2436	2437	2438	2439	2440	2441	2442	2443	2444	2445	2446	2447	2448	2449	2450	2451	2452	2453	2454	2455	2456	2457	2458	2459	2460	2461	2462	2463	2464	2465	2466	2467	2468	2469	2470	2471	2472	2473	2474	2475	2476	2477	2478	2479	2480	2481	2482	2483	2484	2485	2486	2487	2488	2489	2490	2491	2492	2493	2494	2495	2496	2497	2498	2499	2500	2501	2502	2503	2504	2505	2506	2507	2508	2509	2510	2511	2512	2513	2514	2515	2516	2517	2518	2519	2520	2521	2522	2523	2524	2525	2526	2527	2528	2529	2530	2531	2532	2533	2534	2535	2536	2537	2538	2539	2540	2541	2542	2543	2544	2545	2546	2547	2548	2549	2550	2551	2552	2553	2554	2555	2556	2557	2558	2559	2560	2561	2562	2563	2564	2565	2566	2567	2568	2569	2570	2571	2572	2573	2574	2575	2576	2577	2578	2579	2580	2581	2582	2583	2584	2585	2586	2587	2588	2589	2590	2591	2592	2593	2594	2595	2596	2597	2598	2599	2600	2601	2602	2603	2604	2605	2606	2607	2608	2609	2610	2611	2612	2613	2614	2615	2616	2617	2618	2619	2620	2621	2622	2623	2624	2625	2626	2627	2628	2629	2630	2631	2632	2633	2634	2635	2636	2637	2638	2639	2640	2641	2642	2643	2644	2645	2646	2647	2648	2649	2650	2651	2652	2653	2654	2655	2656	2657	2658	2659	2660	2661	2662	2663	2664	2665	2666	2667	2668	2669	2670	2671	2672	2673	2674	2675	2676	2677	2678	2679	2680	2681	2682	2683	2684	2685	2686	2687	2688	2689	2690	2691	2692	2693	2694	2695	2696	2697	2698	2699	2700	2701	2702	2703	2704	2705	2706	2707	2708	2709	2710	2711	2712	2713	2714	2715	2716	2717	2718	2719	2720	2721	2722	2723	2724	2725	2726	2727	2728	2729	2730	2731	2732	2733	2734	2735	2736	2737	2738	2739	2740	2741	2742	2743	2744	2745	2746	2747	2748	2749	2750	2751	2752	2753	2754	2755	2756	2757	2758	2759	2760	2761	2762	2763	2764	2765	2766	2767	2768	2769	2770	2771	2772	2773	2774	2775	2776	2777	2778	2779	2780	2781	2782	2783	2784	2785	2786	2787	2788	2789	2790	2791	2792	2793	2794	2795	2796	2797	2798	2799	2800	2801	2802	2803	2804	2805	2806	2807	2808	2809	2810	2811	2812	2813	2814	2815	2816	2817	2818	2819	2820	2821	2822	2823	2824	2825	2826	2827	2828	2829	2830	2831	2832	2833	2834	2835	2836	2837	2838	2839	2840	2841	2842	2843	2844	2845	2846	2847	2848	2849	2850	2851	2852	2853	2854	2855	2856	2857	2858	2859	2860	2861	2862	2863	2864	2865	2866	2867	2868	2869	2870	2871	2872	2873	2874	2875	2876	2877	2878	2879	2880	2881	2882	2883	2884	2885	2886	2887	2888	2889	2890	2891	2892	2893	2894	2895	2896	2897	2898	2899	2900	2901	2902	2903	2904	2905	2906	2907	2908	2909	2910	2911	2912	2913	2914	2915	2916	2917	2918	2919	2920	2921	2922	2923	2924	2925	2926	2927	2928	2929	2930	2931	2932	2933	2934	2935	2936	2937	2938	2939	2940	2941	2942	2943	2944	2945	2946	2947	2948	2949	2950	2951	2952	2953	2954	2955	2956	2957	2958	2959	2960	2961	2962	2963	2964	2965	2966	2967	2968	2969	2970	2971	2972	2973	2974	2975	2976	2977	2978	2979	2980	2981	2982	2983	2984	2985	2986	2987	2988	2989	2990	2991	2992	2993	2994	2995	2996	2997	2998	2999	3000	3001	3002	3003	3004	3005	3006	3007	3008	3009	3010	3011	3012	3013	3014	3015	3016	3017	3018	3019	3020	3021	3022	3023	3024	3025	3026	3027	3028	3029	3030	3031	3032	3033	3034	3035	3036	3037	3038	3039	3040	3041	3042	3043	3044	3045	3046	3047	3048	3049	3050	3051	3052	3053	3054	3055	3056	3057	3058	3059	3060	3061	3062	3063	3064	3065	3066	3067	3068	3069	3070	3071	3072	3073	3074	3075	3076	3077	3078	3079	3080	3081	3082	3083	3084	3085	3086	3087	3088	3089	3090	3091	3092	3093	3094	3095	3096	3097	3098	3099	3100	3101	3102	3103	3104	3105	3106	3107	3108	3109	3110	3111	3112	3113	3114	3115	3116	3117	3118	3119	3120	3121	3122	3123	3124	3125	3126	3127	3128	3129	3130	3131	3132	3133	3134	3135	3136	3137	3138	3139	3140	3141	3142	3143	3144	3145	3146	3147	3148	3149	3150	3151	3152	3153	3154	3155	3156	3157	3158	3159	3160	3161	3162	3163	3164	3165	3166	3167	3168	3169	3170	3171	3172	3173	3174	3175	3176	3177	3178	3179	3180	3181	3182	3183	3184	3185	3186	3187	3188	3189	3190	3191	3192	3193	3194	3195	3196	3197	3198	3199	3200	3201	3202	3203	3204	3205	3206	3207	3208	3209	3210	3211	3212	3213	3214	3215	3216	3217	3218	3219	3220	3221	3222	3223	3224	3225	3226	3227	3228	3229	3230	3231	3232	3233	3234	3235	3236	3237	3238	3239	3240	3241	3242	3243	3244	3245	3246	3247	3248	3249	3250	3251	3252	3253	3254	3255	3256	3257	3258	3259	3260	3261	3262	3263	3264	3265	3266	3267	3268	3269	3270	3271	3272	3273	3274	3275	3276	3277	3278	3279	3280	3281	3282	3283	3284	3285	3286	3287	3288	3289	3290	3291	3292	3293	3294	3295	3296	3297	3298	3299	3300	3301	3302	3303	3304	3305	3306	3307	3308	3309	3310	3311	3312	3313	3314	3315	3316	3317	3318	3319	3320	3321	3322	3323	3324	3325	3326	3327	3328	3329	3330	3331	3332	3333	3334	3335	3336	3337	3338	3339	3340	3341	3342	3343	3344	3345	3346	3347	3348	3349	3350	3351	3352	3353	3354	3355	3356	3357	3358	3359	3360	3361	3362	3363	3364	3365	3366	3367	3368	3369	3370	3371	3372	3373	3374	3375	3376	3377	3378	3379	3380
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MFG Depreciation COGS	(30,787.57)	(30,685.61)	(30,685.61)
MFG Depreciation SG&A	(7,931.28)	(7,923.23)	(7,808.86)
Total period depreciation	(38,718.85)	(38,608.84)	(38,494.47)
Depreciation on assets sold during year			
Cumulative Depreciation			
NBV	(2,833,348.78)	(2,871,957.62)	(2,910,455.89)
GL NBV	1,494,452.91	1,455,734.06	1,417,125.22
Gap	1,494,452.97	1,455,734.12	1,417,125.28
	(0.06)	(0.06)	(0.06)
	(0.06)		1,378,631.92

# ATAL Fixed Asset Register

	2016		2017		2017	
	Acc Depr	NBV	Acc Depr	NBV	January	February

Category Description	Date Acquired	Depreciation Start Date	Depreciation End Date	Asset Life (yrs)	Method	Cost	Sold	State
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Furniture & Fixtures	4/30/2013	5/1/2013	4/29/2020	7	Straight Line	5,541.23	No	Texas
Furniture & Fixtures	6/30/2013	7/1/2013	6/29/2020	7	Straight Line	5,541.22	No	Texas

<b>Total Furniture &amp; Fixtures</b>						<b>11,082.45</b>		
<b>Less Total Furnitures Sold</b>								
<b>Net Furnitures and Fixtures</b>						<b>11,082.45</b>		

Machinery & Equipment	11/18/2014	12/1/2014	11/30/2019	5	Straight Line	14,205.00	No	Texas
Machinery & Equipment	8/1/2013	8/1/2013	7/31/2018	5	Straight Line	177,151.00	No	Texas
Machinery & Equipment	10/14/2014	1/1/2015	12/31/2019	5	Straight Line	51,783.00	No	Texas
Machinery & Equipment	12/30/2014	1/1/2015	12/31/2019	5	Straight Line	77,100.60	No	Texas
Machinery & Equipment	10/31/2016	1/1/2016	10/31/2021	5	Straight Line	116,104.00	No	Texas
Machinery & Equipment	3/2/2015	4/1/2015	3/30/2020	5	Straight Line	11,250.00	No	Texas
Machinery & Equipment	8/1/2013	8/1/2013	7/31/2018	5	Straight Line	8,080.00	No	Texas
Machinery & Equipment	12/31/2014	1/1/2015	12/31/2019	5	Straight Line	58,580.00	No	Texas
Machinery & Equipment	8/1/2013	8/1/2013	7/31/2017	4	Straight Line	79,373.54	No	Texas
Machinery & Equipment	7/30/2012	8/1/2012	7/31/2019	7	Straight Line	27,073.37	No	Texas
Machinery & Equipment	8/1/2013	8/1/2013	7/31/2016	3	Straight Line	20,680.00	No	Texas
Machinery & Equipment	3/16/2015	4/1/2015	3/30/2020	5	Straight Line	5,829.44	No	Texas
Machinery & Equipment	7/3/2015	8/1/2015	7/30/2020	5	Straight Line	72,335.21	No	Texas
Machinery & Equipment	3/17/2015	4/1/2015	3/30/2020	5	Straight Line	33,521.19	No	Texas
<b>Subtotal Machinery &amp; Equipment</b>						<b>795,144.82</b>		
<b>Total Machinery &amp; Equipment</b>						<b>795,144.82</b>		

<b>TOTAL FIXED ASSETS</b>						<b>810,227.27</b>		
Accumulated Depreciation								
NBV								
GL								
Cap								

□

Category Description	Asset (Years)	Date Acquired	Depreciation Start Date	Depreciation End Date	Cost	Sold	Total 12/31/2016	2016 Accum Depr	NBV	2017	2017 NBV	2018	2018 January	2018 February	2018 March
Automobiles															
This may be a SIERRA C1500 3GTPIUEA7B8304591	5	6/22/2011	7/1/2011	6/29/2016	26,000.00	No	(2,600.00)	(26,000.00)	-	(26,000.00)	-	-	-	-	-
Two Ford Trucks (Bull Hood Ford) 2011 Ford F150 1FTFW1CR8BFB95571 & 1FTFW1CF9BFB75362	5	1/4/2012	2/1/2012	1/30/2017	64,760.42	No	(12,952.08)	(63,681.08)	1,079.34	(64,760.42)	-	-	-	-	-
Title for Automobile (2002 Ford S11K and Trailer SDG Sales \$6,590 on 1/6 and 1/20/12) (Chad Davis)	5	3/16/2012	4/1/2012	3/31/2017	1,172.50	No	(234.50)	(63,111.88)	58.63	(1,172.50)	-	-	-	-	-
2013 Chevrolet Silverado Truck IGCRCREA0DZ135484	5	9/5/2013	10/1/2013	9/30/2018	27,233.52	No	(5,446.70)	(17,701.79)	9,531.73	(23,148.49)	4,085.03	(453.89)	(453.89)	(453.89)	(453.89)
2013 Chevrolet Silverado Truck IGCRCREAXDZ112407	5	9/5/2013	10/1/2013	9/30/2018	27,233.52	No	(5,446.70)	(17,701.79)	9,531.73	(23,148.49)	4,085.03	(453.89)	(453.89)	(453.89)	(453.89)
2014 GMC Sierra 3GTU2VECE3EG171193	5	9/23/2013	10/1/2013	9/30/2018	49,821.50	No	(9,964.30)	(32,383.33)	17,437.53	(36,418.97)	10,073.33	(774.87)	(774.87)	(774.87)	(774.87)
2014 Chevrolet Silverado - Ron Carter Automotive IGCHKZC84EF140879	5	1/20/2014	2/1/2014	1/31/2019	46,492.30	No	(7,298.46)	(27,120.51)	19,371.79	(36,418.97)	10,073.33	(774.87)	(774.87)	(774.87)	(774.87)
2014 Chevrolet Silverado 3GCPRECE2BGS00483	5	1/15/2014	12/1/2014	1/30/2019	39,234.00	No	(7,846.80)	(16,347.50)	22,886.50	(24,194.30)	15,039.70	(653.90)	(653.90)	(653.90)	(653.90)
2015 Mercedes Benz s1 550 WDDJK7DA5FF033209	5	7/6/2015	8/1/2015	7/30/2020	19,589.12	No	(3,917.82)	(15,671.34)	13,712.38	(19,589.12)	5,794.56	(326.49)	(326.49)	(326.49)	(326.49)
2015 GEM (52CG6SGA3F0012766)	5	3/2/2015	4/1/2015	3/30/2020	121,248.33	No	(24,249.67)	(44,457.72)	76,790.61	(68,707.93)	28,258.07	(743.63)	(743.63)	(743.63)	(743.63)
Air conditioner trailer/Administrative Hammond office)	5	6/6/2016	7/1/2016	6/28/2021	44,618.00	No	(7,436.33)	(7,436.33)	37,181.67	(7,436.33)	28,258.07	(743.63)	(743.63)	(743.63)	(743.63)
2015 Ford truck VIN#1FTW12BT6FEB75283	5	8/18/2015	9/1/2015	7/30/2020	852.50	No	(56.83)	(56.83)	795.67	(7,916.67)	625.17	(14.21)	(14.21)	(14.21)	(14.21)
2017 Chevy Silverado 15 (Ross Downing Chevrolet)	5	12/2/2016	1/1/2017	12/31/2021	36,243.30	No	(9,400.00)	(13,316.67)	33,683.33	(22,716.67)	24,283.33	(783.33)	(783.33)	(783.33)	(783.33)
Total					615,733.01				36,243.30	(7,248.66)	28,994.64	(604.06)	(604.06)	(604.06)	(604.06)
Trailers															
Trailer Unit	5	8/26/2009	9/1/2009	8/31/2014	8,692.92	No	-	(8,692.92)	-	(8,692.92)	-	-	-	-	-
Trailer Unit	5	5/17/2010	6/1/2010	5/31/2015	9,957.60	No	-	(9,957.60)	-	(9,957.60)	-	-	-	-	-
Trailer Unit	5	6/30/2010	7/1/2010	6/30/2015	7,861.32	No	-	(7,861.32)	-	(7,861.32)	-	-	-	-	-
Trailer Unit	5	9/30/2010	10/1/2010	9/30/2015	2,582.22	No	-	(2,582.22)	-	(2,582.22)	-	-	-	-	-
Trailer Units (Navigation Electronics)	5	5/27/2011	6/1/2011	5/30/2016	7,734.08	No	(644.51)	(7,734.08)	-	(7,734.08)	-	-	-	-	-
Three new trailer unit with USB boot	5	9/1/2011	9/1/2011	8/30/2016	8,809.03	No	(1,174.54)	(8,809.03)	-	(8,809.03)	-	-	-	-	-
10 Nomad Handholds	5	1/24/2012	2/1/2012	1/30/2017	27,680.40	No	(5,536.08)	(27,219.06)	461.34	(27,680.40)	-	-	-	-	-
Trailer Units (HD Supply)	5	10/25/2012	11/1/2012	10/31/2017	7,200.00	No	(1,440.00)	(6,000.00)	1,200.00	(7,200.00)	-	-	-	-	-
Trailer Units (HD Supply)	5	10/30/2012	11/1/2012	10/31/2017	2,400.00	No	(480.00)	(2,000.00)	400.00	(2,400.00)	-	-	-	-	-
Trailer Units (HD Supply)	5	1/19/2012	12/1/2012	1/30/2017	4,800.00	No	(960.00)	(3,920.00)	880.00	(4,800.00)	-	-	-	-	-
Trailer Units (HD Supply)	5	1/19/2012	12/1/2012	1/30/2017	4,800.00	No	(960.00)	(3,920.00)	880.00	(4,800.00)	-	-	-	-	-
Trailer Units (HD Supply)	5	1/19/2012	12/1/2012	1/30/2017	2,400.00	No	(480.00)	(1,960.00)	440.00	(2,400.00)	-	-	-	-	-
Trailer Nomad unit (Qty 2) - HD Supply - Water Works Model 900LE SENSUS	5	1/18/2013	2/1/2013	1/31/2018	4,985.50	No	(997.10)	(3,905.31)	1,080.19	(4,902.41)	83.09	(83.09)	(83.09)	(83.09)	(83.09)
Trailer Nomad Unit - Pittsburg Water and Sewer Authority	5	2/13/2014	3/1/2014	2/28/2019	32,250.00	No	(6,450.00)	(18,775.00)	13,975.00	(24,725.00)	7,525.00	(537.50)	(537.50)	(537.50)	(537.50)
Trailer Nomad Unit(HD Supply invoice#E240696)	5	7/24/2015	8/1/2015	7/30/2020	7,350.00	No	(1,470.00)	(3,797.50)	3,552.50	(5,267.50)	2,082.50	(122.50)	(122.50)	(122.50)	(122.50)
Trailer Nomad Unit(HD Supply invoice#271959)	5	7/30/2015	8/1/2015	7/30/2020	41,900.00	No	(8,380.00)	(16,760.00)	25,140.00	(25,140.00)	16,760.00	(698.33)	(698.33)	(698.33)	(698.33)
Trailer Nomad Unit (reclass sales tax on asset purchase)	5	7/31/2015	8/2/2015	7/31/2020	20,950.00	No	(4,190.00)	(8,380.00)	12,570.00	(12,570.00)	8,380.00	(349.17)	(349.17)	(349.17)	(349.17)
Command link for installation	5	10/23/2015	11/1/2015	10/30/2020	5,656.50	No	(1,131.30)	(2,262.60)	3,393.90	(3,393.90)	2,262.60	(94.28)	(94.28)	(94.28)	(94.28)
Trailer Nomad unit(HD supply invoice#F414873)	5	4/21/2016	5/1/2016	4/30/2021	34,567.50	No	(4,609.00)	(4,609.00)	29,958.50	(11,522.50)	23,045.00	(22.50)	(22.50)	(22.50)	(22.50)
Trailer Nomad Unit(HD Supply)	5	4/12/2015	5/1/2015	4/29/2020	68,506.50	No	(13,701.30)	(22,835.50)	45,671.00	(36,536.80)	13,969.70	(1,141.78)	(1,141.78)	(1,141.78)	(1,141.78)
T8500 touchbook unit &Shoulder Strap	5	9/30/2016	10/1/2016	9/30/2021	18,485.00	No	(924.25)	(924.25)	17,560.75	(4,621.25)	13,863.75	(308.08)	(308.08)	(308.08)	(308.08)
T8500 touchbook unit &Shoulder Strap	5	9/30/2016	10/1/2016	9/30/2021	2,772.75	No	(138.64)	(138.64)	2,634.11	(693.19)	2,079.56	(46.21)	(46.21)	(46.21)	(46.21)
22 Trailer Nomad Unit **990LE**	5	10/31/2016	11/1/2016	10/31/2021	32,065.00	No	(1,068.83)	(1,068.83)	30,996.17	(7,481.83)	24,583.17	(534.42)	(534.42)	(534.42)	(534.42)
12 x Trailer Units (Mobile Demand)	5	1/24/2017	2/1/2017	1/31/2022	18,672.00	No	-	-	30,996.17	(3,423.20)	15,248.80	(311.20)	(311.20)	(311.20)	(311.20)
50 x T8650 Touchbook unit (Mobile Demand) with shoulder straps	5	2/27/2017	3/1/2017	2/28/2022	9,058.00	No	-	-	7,548.33	(1,509.67)	7,548.33	(150.97)	(150.97)	(150.97)	(150.97)
99 x T8650 Tablets (8" Displays with battery and adaptor)	5	7/7/2017	8/1/2017	7/31/2022	86,762.38	No	-	-	773.85	(7,230.20)	79,532.18	(1,446.04)	(1,446.04)	(1,446.04)	(1,446.04)
15 T8500 Touchbook units with shoulder straps (from Mobile Demand)	5	10/31/2016	11/1/2016	10/31/2021	13,863.75	No	(462.13)	(462.13)	13,401.63	(3,234.88)	10,628.88	(231.06)	(231.06)	(231.06)	(231.06)
Total					508,261.95										
Trailers															
Trailer and notary fee	5	11/13/2009	12/1/2009	11/30/2014	6,773.00	No	-	(6,773.00)	-	(6,773.00)	-	-	-	-	-
Trailer	5	12/16/2009	1/1/2010	12/31/2014	1,027.47	No	-	(1,027.47)	(0.00)	(1,027.47)	(0.00)	-	-	-	-
Trailer	5	2/3/2010	3/1/2010	2/28/2015	4,600.00	No	-	(4,600.00)	-	(4,600.00)	-	-	-	-	-
Trailer	5	3/31/2011	4/1/2011	3/30/2016	3,743.00	No	(187.15)	(3,743.00)	-	(3,743.00)	-	-	-	-	-
Trailer	5	1/6/2012	2/1/2012	1/30/2017	6,416.25	No	(1,283.25)	(6,416.25)	106.94	(6,416.25)	-	-	-	-	-
Generator for Plasma Trailer - Valentine Mechanical Services, LLC - Model 5735 17.5 Portable	5	4/15/2013	5/1/2013	4/30/2018	2,901.92	No	(580.38)	(2,128.07)	773.85	(2,708.46)	193.46	(48.37)	(48.37)	(48.37)	(48.37)
Plasma trailer (Wagomatster truck and trailer)	5	3/9/2017	4/1/2017	3/31/2022	5,250.00	No	-	-	5,250.00	(5,250.00)	5,250.00	(787.50)	(787.50)	(787.50)	(787.50)
Vac-Tron Vacuum Extractor	5	10/26/2016	5/2/2017	5/1/2022	49,180.96	No	(1,639.37)	(1,639.37)	47,541.59	(11,475.56)	37,705.40	(819.68)	(819.68)	(819.68)	(819.68)
Total					79,892.60										
Equipment															
Generator for trailer	5	3/12/2010	4/1/2010	3/31/2015	2,832.91	No	-	(2,832.91)	-	(2,832.91)	-	-	-	-	-
Generator for plasma trailer	5	5/26/2010	6/1/2010	5/31/2015	2,307.38	No	-	(2,307.38)	-	(2,307.38)	-	-	-	-	-
Powervax 45 plasma torch	5	6/3/2010	7/1/2010	6/30/2015	1,393.74	No	-	(1,393.74)	-	(1,393.74)	-	-	-	-	-
Granger	5	10/21/2010	11/1/2010	10/31/2015	1,337.23	No	-	(1,337.23)	-	(1,337.23)	-	-	-	-	-
Plasma, prover max 45 system	5	7/15/2011	8/1/2011	7/30/2016	3,995.77	No	(466.17)	(3,995.77)	-	(3,995.77)	-	-	-	-	-
Sensus W-1250 large meter fluid tester	5	7/29/2011	8/1/2011	7/30/2016	5,500.00	No	(641.67)	(5,500.00)	-	(5,500.00)	-	-	-	-	-
Plasma cutter	5	1/30/2012	2/1/2012	1/30/2017	6,736.20	No	(1,347.24)	(6,736.20)	-	(6,736.20)	-	-	-	-	-
Plasma cutter	5	2/29/2012	3/1/2012	2/28/2017	2,032.93	No	(406.59)	(1,965.17)	67.76	(2,032.93)	-	-	-	-	-
Generator for plasma trailer	5	3/1/2012	3/1/2012	2/28/2017	2,428.23	No	(485.65)	(2,428.23)	80.94	(2,428.23)	-	-	-	-	-
Generator for plasma trailer	5	3/7/2012	4/1/2012	3/31/2017	9,263.57	No	(1,852.71)	(8,800.39)	463.18	(9,263.57)	-	-	-	-	-



Category Description										
Asset (Years)	Date Acquired	Depreciation Start Date	Depreciation End Date	Cost	Sold		Accum Dgpr	NBV		
Plasma cutter	5	8/23/2012	9/1/2012	8/31/2017	3,386.93	No	(677.39)	(2,935.34)	451.59	(3,274.03)
	5	9/24/2012	10/1/2012	9/30/2017	1,838.26	No	(367.65)	(1,562.52)	275.74	(1,838.26)
	5	9/15/2012	10/1/2012	9/30/2017	1,920.00	No	(384.00)	(1,632.00)	288.00	(1,920.00)
	5	11/13/2012	12/1/2012	11/30/2017	5,246.91	No	(1,049.38)	(4,284.98)	961.93	(5,246.91)
	5	11/30/2012	12/1/2012	11/30/2017	1,817.36	No	(363.47)	(1,484.18)	333.18	(1,817.36)
	5	2/19/2013	3/1/2013	2/28/2018	2,699.99	No	(540.00)	(2,069.99)	630.00	(2,699.99)
	5	6/13/2013	7/1/2013	6/30/2018	43,335.00	No	(8,667.00)	(30,334.50)	13,000.50	(43,335.00)
	5	7/29/2013	8/1/2013	7/31/2018	15,021.25	No	(3,004.25)	(12,017.00)	4,756.73	(15,021.25)
	5	12/27/2013	1/1/2014	12/31/2018	26,300.00	No	(5,260.00)	(15,780.00)	10,520.00	(26,300.00)
	5	10/29/2014	11/1/2014	10/31/2019	15,213.80	No	(3,042.76)	(6,592.65)	8,621.15	(15,213.80)
Subtotal Machinery & Equipment				157,368.43		-	-	-	-	-
Total Machinery & Equipment-Sold				157,368.43		-	-	-	-	-
Total Machinery & Equipment						-	-	-	-	-
Furniture & Fixtures										
Office furniture for Danicia	5	3/12/2010	4/1/2010	3/31/2015	1,929.15	No	-	(1,929.15)	-	(1,929.15)
	5	4/12/2010	5/1/2010	4/30/2015	4,966.00	No	-	(4,966.00)	-	(4,966.00)
	5	11/02/2010	12/1/2010	11/30/2015	1,958.54	No	-	(1,958.54)	-	(1,958.54)
	5	11/02/2010	12/1/2010	11/30/2015	1,100.87	No	-	(1,100.87)	-	(1,100.87)
	5	5/5/2016	6/1/2016	5/31/2021	22,164.50	No	(2,216.46)	(19,948.04)	15,515.14	(22,164.50)
Office furniture for new downtown office				32,119.06		-	-	-	-	-
Computer and Office Equip										
Commercial meter tester	5	6/16/2009	7/1/2009	6/30/2014	2,871.24	No	-	(2,871.24)	-	(2,871.24)
	5	11/13/2009	12/1/2009	11/30/2014	630.63	No	-	(630.63)	-	(630.63)
	5	5/3/2010	6/1/2010	5/31/2015	4,457.16	No	-	(4,457.16)	-	(4,457.16)
	5	6/7/2010	7/1/2010	6/30/2015	4,000.00	No	-	(4,000.00)	-	(4,000.00)
	5	12/9/2010	1/1/2011	12/31/2015	2,038.35	No	-	(2,038.35)	-	(2,038.35)
	5	4/7/2011	5/1/2011	4/29/2016	1,629.55	No	(108.64)	(1,629.55)	-	(1,629.55)
	5	12/30/2011	1/1/2012	12/30/2016	3,314.98	No	(663.00)	(3,314.98)	-	(3,314.98)
	5	12/30/2011	1/1/2012	12/30/2016	1,591.28	No	(318.26)	(1,591.28)	-	(1,591.28)
	5	9/14/2012	10/1/2012	9/30/2017	1,611.91	No	(322.38)	(1,370.12)	241.79	(1,611.91)
	5	1/12/2015	2/1/2015	1/31/2020	5,447.82	No	(1,089.56)	(2,088.33)	3,359.49	(5,447.82)
Total Computer and Office Equip				27,592.92		-	-	-	-	2,269.93
Software										
Riversoft	5	01/19/2010	2/1/2010	1/31/2015	15,000.00	No	-	(15,000.00)	-	(15,000.00)
	5	03/01/2010	3/1/2010	2/28/2015	10,000.00	No	-	(10,000.00)	-	(10,000.00)
	5	3/2/2010	4/1/2010	3/31/2015	7,985.50	No	-	(7,985.50)	-	(7,985.50)
	5	06/24/2010	7/1/2010	6/30/2015	10,000.00	No	-	(10,000.00)	-	(10,000.00)
	5	08/20/2010	9/1/2010	8/31/2015	4,809.00	No	-	(4,809.00)	-	(4,809.00)
	5	10/04/2010	11/1/2010	10/31/2015	7,500.00	No	-	(7,500.00)	-	(7,500.00)
	5	10/7/2010	11/1/2010	10/31/2015	15,000.00	No	-	(15,000.00)	-	(15,000.00)
	5	11/29/2010	12/1/2010	11/30/2015	7,500.00	No	-	(7,500.00)	-	(7,500.00)
	5	11/29/2010	12/1/2010	11/30/2015	20,000.00	No	-	(20,000.00)	-	(20,000.00)
	5	11/30/2010	12/1/2010	11/30/2015	7,500.00	No	-	(7,500.00)	-	(7,500.00)
	5	12/31/2010	1/1/2011	12/31/2015	7,500.00	No	-	(7,500.00)	-	(7,500.00)
	5	02/01/2011	2/1/2011	1/31/2016	7,500.00	No	(125.00)	(7,500.00)	-	(7,500.00)
	5	03/09/2011	4/1/2011	3/30/2016	37,528.75	No	(1,876.44)	(37,528.75)	-	(37,528.75)
	5	04/04/2011	5/1/2011	4/29/2016	20,992.50	No	(1,399.50)	(20,992.50)	-	(20,992.50)
	5	04/12/2011	5/1/2011	4/29/2016	7,500.00	No	(500.00)	(7,500.00)	-	(7,500.00)
	5	5/19/2011	6/1/2011	5/30/2016	7,500.00	No	(625.00)	(7,500.00)	-	(7,500.00)
	5	6/7/2011	7/1/2011	6/29/2016	21,060.00	No	(2,106.00)	(21,060.00)	-	(21,060.00)
	5	7/22/2011	8/1/2011	7/30/2016	21,600.00	No	(2,520.00)	(21,600.00)	-	(21,600.00)
	5	7/28/2011	8/1/2011	7/30/2016	21,937.50	No	(2,559.38)	(21,937.50)	-	(21,937.50)
	5	7/28/2011	8/1/2011	7/30/2016	49,303.33	No	(5,752.06)	(49,303.33)	-	(49,303.33)
5	7/28/2011	8/1/2011	7/30/2016	7,500.00	No	(875.00)	(7,500.00)	-	(7,500.00)	
5	9/8/2011	10/1/2011	9/29/2016	49,303.33	No	(7,395.50)	(49,303.33)	-	(49,303.33)	
5	9/8/2011	10/1/2011	9/29/2016	7,500.00	No	(1,125.00)	(7,500.00)	-	(7,500.00)	
5	9/30/2011	10/1/2011	9/29/2016	7,500.00	No	(1,125.00)	(7,500.00)	-	(7,500.00)	
5	10/20/2011	11/1/2011	10/30/2016	7,500.00	No	(1,250.00)	(7,500.00)	-	(7,500.00)	
5	10/31/2011	11/1/2011	10/30/2016	49,303.33	No	(8,217.22)	(49,303.33)	-	(49,303.33)	
5	10/31/2011	11/1/2011	10/30/2016	5,000.00	No	(833.33)	(5,000.00)	-	(5,000.00)	
5	11/30/2011	12/1/2011	11/29/2016	7,500.00	No	(1,375.00)	(7,500.00)	-	(7,500.00)	
5	11/30/2011	12/1/2011	11/29/2016	7,500.00	No	(1,375.00)	(7,500.00)	-	(7,500.00)	
5	12/30/2011	1/1/2012	12/30/2016	7,500.00	No	(1,500.00)	(7,500.00)	-	(7,500.00)	
5	12/30/2011	1/1/2012	12/30/2016	5,000.00	No	(1,000.00)	(5,000.00)	-	(5,000.00)	
5	12/30/2011	1/1/2012	12/30/2016	6,500.00	No	(1,300.00)	(6,500.00)	-	(6,500.00)	
5	2/14/2012	3/1/2012	2/28/2017	17,500.00	No	(3,500.00)	(16,916.67)	583.33	(17,500.00)	
5	3/19/2012	4/1/2012	3/31/2017	19,000.00	No	(3,800.00)	(18,050.00)	950.00	(19,000.00)	
5	6/21/2012	7/1/2012	6/30/2017	10,000.00	No	(2,000.00)	(8,000.00)	1,000.00	(10,000.00)	
5	9/17/2012	10/1/2012	9/30/2017	1,000.00	No	(2,000.00)	(9,350.00)	1,650.00	(1,000.00)	
5	10/18/2012	11/1/2012	10/31/2017	6,162.50	No	(1,232.50)	(5,135.42)	1,027.08	(6,162.50)	
5	1/12/2015	2/1/2015	1/31/2020	23,000.00	No	(4,600.00)	(8,816.67)	14,183.33	(23,000.00)	
5	3/2/2015	4/1/2015	3/30/2020	11,666.00	No	(2,333.20)	(4,083.10)	7,582.90	(11,666.00)	
5	7/1/2015	8/1/2015	7/30/2020	11,666.00	No	(2,333.20)	(3,303.37)	8,360.63	(11,666.00)	
5	4/8/2015	5/1/2015	4/29/2020	11,666.00	No	(2,333.20)	(3,888.67)	7,777.33	(11,666.00)	
Doubletsk Technologies						-	-	-	-	-
Doubletsk Technologies						-	-	-	-	-
One time fee for install of oracle software (Tier 1 SW Solutions)						-	-	-	-	-
MeterX Software						-	-	-	-	-
MeterX Software						-	-	-	-	-
MeterX Software						-	-	-	-	-
MeterX Development						-	-	-	-	-
MeterX Development						-	-	-	-	-
MeterX Development						-	-	-	-	-
MeterX Development						-	-	-	-	-
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MeterX Development						-	-	-	-	-
MeterX Development						-	-	-	-	-
MeterX Development						-	-	-	-	-

Category Description	Asset (Years)	Date Acquired	Depreciation Start Date	Depreciation End Date	Cost	Sold	Accum. Degr.	NBV			
Doublelake technologies software	5	9/1/2015	10/1/2015	9/29/2020	5,833.00	No	(1,166.60)	(1,458.25)	4,374.75	(97.22)	(97.22)
Meter X form RDX Innovations	5	7/1/2016	8/1/2016	7/31/2021	19,200.00	No	(1,600.00)	(1,600.00)	17,600.00	(320.00)	(320.00)
Meter X	5	5/4/2015	6/1/2015	5/30/2020	11,666.00	No	(1,666.00)	(3,694.23)	7,971.77	(194.43)	(194.43)
Total Including Software					64,182.74		-	-	714,382.43	(20,899.69)	(20,899.69)
					2,062,150.71		(278,752.20)	(1,216,276.40)		(20,703.70)	(20,854.52)
Accumulated Depreciation							(1,216,276.40)			(20,899.69)	(41,603.38)
NBV											(61,457.90)
GL										581,398.45	560,694.75
Gap										560,694.75	539,840.23
										0.00	539,840.23

Debtor XtraLight Manufacturing, Ltd.  
NameCase number (If known) 18-31857-H1-11

## 43. Total of Part 7.

Add lines 39 through 42. Copy the total to line 86.

**\$505,144.00**

## 44. Is a depreciation schedule available for any of the property listed in Part 7?

- ☒ No  
☐ Yes

## 45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

- ☒ No  
☐ Yes

**Part 8: Machinery, equipment, and vehicles**

## 46. Does the debtor own or lease any machinery, equipment, or vehicles?

- ☐ No. Go to Part 9.  
☒ Yes Fill in the information below.

**General description**  
 Include year, make, model, and identification numbers  
 (i.e., VIN, HIN, or N-number)

**Net book value of  
debtor's interest**  
 (Where available)

**Valuation method used  
for current value**

**Current value of  
debtor's interest**

## 47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles

47.1. Automobiles - See Fixed Asset Schedule  
 attached as Exhibit B39.  
 Manufacturing Division: \$26,912  
 UMS Division: \$199,916

**\$226,828.00****\$226,828.00**48. Watercraft, trailers, motors, and related accessories *Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels*

48.1. Trailers - See Fixed Asset Schedule  
 attached as Exhibit B39.  
 UMS Division

**\$39,838.00****\$39,838.00**

## 49. Aircraft and accessories

50. Other machinery, fixtures, and equipment (excluding farm  
 machinery and equipment)  
 Machinery and Equipment - See Fixed Asset  
 Schedule attached as Exhibit B39.  
 Manufacturing Division: \$1,346,118  
 UMS Division: \$13,595

**\$1,359,713.00****\$1,359,713.00**

## 51. Total of Part 8.

Add lines 47 through 50. Copy the total to line 87.

**\$1,626,379.00**

## 52. Is a depreciation schedule available for any of the property listed in Part 8?

- ☒ No  
☐ Yes

## 53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

- ☒ No  
☐ Yes

**Part 9: Real property**



Debtor XtraLight Manufacturing, Ltd.  
NameCase number (If known) 18-31857-H1-11

54. Does the debtor own or lease any real property?

- ☒ No. Go to Part 10.  
☐ Yes Fill in the information below.

**Part 10: Intangibles and intellectual property**

59. Does the debtor have any interests in intangibles or intellectual property?

- ☐ No. Go to Part 11.  
☒ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60.	Patents, copyrights, trademarks, and trade secrets Versatile Lighting Units U.S. Patent No. 8,764,236, filed July 25, 2012, and issued July 1, 2014. Versatile Lighting Units U.S. Patent No. 8,322,906, filed August 8, 2011, and issued December 4, 2012. Fluorescent Light Fixture U.S. Patent No. 6,428,183, issued August 6, 2002. Systems and Methods for Providing a Field Repairable Light Fixture with a Housing that Dissipates Heat U.S. Patent No. 9,644,829, issued May 9, 2017.	\$0.00		Unknown
61.	Internet domain names and websites xlm.com unswater.com	\$0.00		Unknown
62.	Licenses, franchises, and royalties See business licenses attached as Exhibit B62.	\$0.00		Unknown
63.	Customer lists, mailing lists, or other compilations			
64.	Other intangibles, or intellectual property Trademarks: Serial No. Reg. No Word Mark 85196762 4055255 XTRALIGHT MANUFACTURING 85196743 4055254 XTRALIGHT MANUFACTURING 85196501 4048120 XTRALIGHT 85196470 4048119 XTRALIGHT	Unknown		\$0.00

65. Goodwill

66. Total of Part 10.

Add lines 60 through 65. Copy the total to line 89.

\$0.00

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107?)

- ☒ No  
☐ Yes

State	License Number	Name on License	State Registration	Classification	Expiration
AL	03802	Xtralight Manufacturing, Ltd.	Xtralight Manufacturing, Ltd.	Electrical Contractor	6/30/2018
AL	47871	XTRALIGHT MANUFACTURING, LTD	Xtralight Manufacturing, Ltd.	General Contractor	7/31/2018
AR	0204330518	Xtralight Manufacturing, Ltd., d/b/a Utility Metering Solutions	Xtralight Manufacturing, Ltd., d/b/a Utility Metering Solutions	Electrical, Building (C&R), Specialty C-36 Plumbing/C-10 Electrical	5/31/2018
CA	996220	XTRALIGHT MANUFACTURING LP	XTRALIGHT MANUFACTURING LP	Underground Utility and Excavation Contractor	8/31/2018
FL	CUC1224402	Utility Metering Solutions (UMS)	XTRALIGHT MANUFACTURING, LTD	Electrical Contractor	8/31/2018
FL	EC13008119	XTRALIGHT MANUFACTURING, LTD	XTRALIGHT MANUFACTURING, LTD	Electrical Contractor	8/31/2018
GA	EN215950	Allen Ray Kirk		Electrical Contractor	6/30/2018
GA	UC302282	X-Tra Manufacturing Partnership Ltd		Utility	4/30/2017
KY	CE64478, ME64370	Allen R Kirk XTRALIGHT MANUFACTURING LTD	XTRALIGHT MANUFACTURING LTD	Electrical	8/19/2019
LA	54781	XTRALIGHT MANUFACTURING PARTNERSHIP, LTD	XTRALIGHT MANUFACTURING, LTD	Electrical, Installation, Test, Recalibration, and Repair of Meters	5/19/2019
MS	18941-MC	XTRALIGHT MANUFACTURING LTD, A TEXAS LIMITED PARTNERSHIP DBA UTILITY METERING SOLUTIONS	Xtralight Manufacturing, LTD DBA Utility Metering Solutions	Electrical, Installation of Equipment, Machinery, and Engines	4/8/2018
NC	74004	XTRALight Manufacturing, Ltd., T/A XTRALight Manufacturing Limited Partnership	Xtralight Manufacturing Limited Partnership	General Contractor - PU (Water Lines and Sewer Lines)	12/31/2017
NC	11856-U	Xtralight Manufacturing Limited Partnership	Xtralight Manufacturing Limited Partnership	Electrical	11/30/2018
ND	49528	XTRALIGHT MANUFACTURING LP	XTRALIGHT MANUFACTURING LP	Class A - General Contractor	3/1/2018
NM	382032	XTRALIGHT MANUFACTURING LTD, LP	XTRALIGHT MANUFACTURING LTD, LP	GS-29 Meter Replacement	5/31/2020
OH	46595	XTRALIGHT MANUFACTURING LTD	XTRALIGHT MANUFACTURING, LTD	Electrical	12/15/2019
SC	M111746	XTRA LIGHT MANUFACTURING PTN LTD		EL5 - Electrical	10/31/2017
SC	G118361	XTRA LIGHT MANUFACTURING PTN LTD		WL5 - General Contractor	10/31/2018
TN	00062568	XTRA LIGHT MANUFACTURING, LTD	XTRALIGHT MANUFACTURING, LTD	Specialty - Water Meter Installation and Lighting Retrofit and Replacement	7/31/2019
TX	28555	XTRA LIGHT MANUFACTURING LTD	Xtralight Manufacturing, Ltd.	Electrical	2/20/2018
UT	9360566-5502	ALLEN KIRK		Master Electrician	11/30/2018
VA	2705136244	XTRALIGHT MANUFACTURING PARTNERSHIP LTD UTILITY METERING SOLUTIONS		Class A Contractor - ELE, H/H	9/30/2018
WI	1312564	Allen Ray Kirk		Master Electrician	6/30/2018
WV	M082799RENC0711	ALLEN R KIRK		Master Electrician	6/30/2018



Debtor XtraLight Manufacturing, Ltd.  
NameCase number (if known) 18-31857-H1-11

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

- ☒ No  
☐ Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

- ☒ No  
☐ Yes

**Part 11: All other assets**

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☐ No. Go to Part 12.  
☒ Yes Fill in the information below.

Current value of  
debtor's interest71. **Notes receivable**  
Description (include name of obligor)72. **Tax refunds and unused net operating losses (NOLs)**  
Description (for example, federal, state, local)73. **Interests in insurance policies or annuities**  
Zurich American Insurance Company, Policy Number  
CPP008628503, Building and Content Property  
Insurance

Unknown

Regions Ins. Inc - Fort Smith:  
 General Liability Insurance, Policy No. xxxxx2526;  
 Automobile Liability Insurance, Policy No. xxxx2526;  
 Umbrella Liability Insurance, Policy No. xxxx379A;  
 Workers Compensation Insurance, Policy No. xxxx0136;  
 Installation F/T and Leased/Rent Equipment, Policy No.  
 xxxx8503

Unknown

74. **Causes of action against third parties (whether or not a lawsuit has been filed)**75. **Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims**76. **Trusts, equitable or future interests in property**77. **Other property of any kind not already listed Examples: Season tickets, country club membership****Affiliate Receivable - Cay Capital LLC**

\$33,347.30

78. **Total of Part 11.**

Add lines 71 through 77. Copy the total to line 90.

\$33,347.30

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

- ☒ No  
☐ Yes

Debtor XtraLight Manufacturing, Ltd.  
Name

Case number (If known) 18-31857-H1-11

Debtor XtraLight Manufacturing, Ltd.  
NameCase number (if known) 18-31857-H1-11**Part 12: Summary**

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. Copy line 5, Part 1	\$118,837.95	
81. Deposits and prepayments. Copy line 9, Part 2.	\$199,603.91	
82. Accounts receivable. Copy line 12, Part 3.	\$4,085,686.92	
83. Investments. Copy line 17, Part 4.	\$217,953.00	
84. Inventory. Copy line 23, Part 5.	\$2,376,113.00	
85. Farming and fishing-related assets. Copy line 33, Part 6.	\$0.00	
86. Office furniture, fixtures, and equipment; and collectibles. Copy line 43, Part 7.	\$505,144.00	
87. Machinery, equipment, and vehicles. Copy line 51, Part 8.	\$1,626,379.00	
88. Real property. Copy line 56, Part 9.....>		\$0.00
89. Intangibles and intellectual property. Copy line 66, Part 10.	\$0.00	
90. All other assets. Copy line 78, Part 11.	+ \$33,347.30	
91. Total. Add lines 80 through 90 for each column	\$9,163,065.08	+ 91b. \$0.00
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		\$9,163,065.08

**Fill in this information to identify the case:**Debtor name XtraLight Manufacturing, Ltd.United States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXASCase number (if known) 18-31857-H1-11☐ Check if this is an amended filing**Official Form 206D****Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible.

**1. Do any creditors have claims secured by debtor's property?**☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.☒ Yes. Fill in all of the information below.**Part 1: List Creditors Who Have Secured Claims****2. List in alphabetical order all creditors who have secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim.

Column A

Column B

**Amount of claim****Value of collateral that supports this claim**

Do not deduct the value of collateral.

**2.1 ALIEF ISD TAX ASSESSOR/COLLECTOR**

Creditor's Name

**14051 BELLAIRE BLVD  
#100  
HOUSTON, TX 77083**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**Inventory maintained at GI Circuits, 10850 W Wilcrest Dr., Houston, Texas**

Describe the lien

**2018 Accrued Personal Property Taxes**

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply.

☒ Contingent☒ Unliquidated☐ Disputed**\$0.00****\$0.00****2.2 AMADA AMERICA INC**

Creditor's Name

**7025 FIRESTONE BLVD  
BUENA PARK, CA 90621**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

**10/03/2017**

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

Describe debtor's property that is subject to a lien

**One Amada NC Laser Cutting Machine, Model LCG3015AJ-3K Paid in Full. Lien has not been terminated.**

Describe the lien

**UCC LIEN**

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

**\$0.00****\$0.00**



Debtor XtraLight Manufacturing, Ltd.  
NameCase number (if know) 18-31857-H1-11☒ No☐ Yes. Specify each creditor,  
including this creditor and its relative  
priority.☐ Contingent☐ Unliquidated☒ Disputed**2.3 BBVA COMPASS BANK**

Creditor's Name

**2200 POST OAK BLVD  
20TH FL  
HOUSTON, TX 77056**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an  
interest in the same property?☒ No☐ Yes. Specify each creditor,  
including this creditor and its relative  
priority.

Describe debtor's property that is subject to a lien

**Manufacturing Equipment****\$250,000.00****\$0.00**

Describe the lien

**Equipment Note D**

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed**2.4 BBVA COMPASS BANK**

Creditor's Name

**2200 POST OAK BLVD  
20TH FL  
HOUSTON, TX 77056**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an  
interest in the same property?☒ No☐ Yes. Specify each creditor,  
including this creditor and its relative  
priority.

Describe debtor's property that is subject to a lien

**Laser Cutter****\$481,412.00****\$0.00**

Describe the lien

**Equipment Note E**

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed**2.5 BBVA COMPASS BANK**

Creditor's Name

**2200 POST OAK BLVD  
20TH FLOOR  
HOUSTON, TX 77056**

Creditor's mailing address

Describe debtor's property that is subject to a lien

**Assets of Debtor****\$4,300,000.00****\$0.00**

Describe the lien

**Cross Collateralized Loan**

Is the creditor an insider or related party?

☒ No

Debtor XtraLight Manufacturing, Ltd.  
NameCase number (if know) 18-31857-H1-11

Creditor's email address, if known

☐ Yes

Is anyone else liable on this claim?

☐ No☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Date debt was incurred

4/23/2010

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

2.6

**CRESTRON ELECTRONICS INC**

Creditor's Name

15 VOLVO DRIVE  
ROCKLEIGH, NJ 07647

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

7/5/2013

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

Electronic goods and merchandise bearing Crestron trademark

\$0.00

\$0.00

Describe the lien

UCC Lien

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☒ Contingent☒ Unliquidated☒ Disputed

2.7 HARRIS COUNTY, ET AL

Creditor's Name

c/o TARA GRUNDEMEIER  
LINEBARGER GOGGAN  
BLAIR & SAMPSON LLP  
P O BOX 3064  
HOUSTON, TX 77253-3064

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

Real and personal property located at 8812 Frey Road, Houston, Texas. \*All local taxes combined

\$22,000.00

\$0.00

Describe the lien

2018 Accrued Real (Leasehold) and Personal Property Taxes

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☒ Contingent☒ Unliquidated☐ Disputed

Debtor XtraLight Manufacturing, Ltd.  
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2.8	<b>ORBIAN FINANCIAL SERVICES II LLC</b> Creditor's Name  <b>200 CONNECTICUT AVE</b> <b>NORWALK, CT 06854</b> Creditor's mailing address  Creditor's email address, if known  Date debt was incurred <b>6/11/2010</b> Last 4 digits of account number  Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien <b>Accounts or A/R owed to Debtor by Siemens Industry Inc.</b>  Describe the lien <b>UCC LIEN</b> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)  As of the petition filing date, the claim is: Check all that apply <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown \$0.00
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2.9	<b>PASADENA ISD TAX ASSESSOR/COLLECTOR</b> Creditor's Name  <b>2223 STRAWBERRY ROAD</b> <b>PASADENA, TX 77502</b> Creditor's mailing address  Creditor's email address, if known  Date debt was incurred  Last 4 digits of account number  Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien <b>Real and personal property located at 8812 Frey Road, Houston, Texas. *See Item 2.7</b>  Describe the lien <b>2018 Accrued Real (Leasehold) and Personal Property Taxes</b> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)  As of the petition filing date, the claim is: Check all that apply <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00 \$0.00
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3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$5,053,412.00

**Part 2: List Others to Be Notified for a Debt Already Listed in Part 1**

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did you enter the related creditor?

Last 4 digits of account number for this entity

**Fill in this information to identify the case:**Debtor name XtraLight Manufacturing, Ltd.United States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXASCase number (if known) 18-31857-H1-11☐ Check if this is an amended filing**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

**Part 1: List All Creditors with PRIORITY Unsecured Claims**

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☐ No. Go to Part 2.☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

	Total claim	Priority amount
<b>2.1</b> Priority creditor's name and mailing address <b>Texas Comptroller of Public Accounts</b> <b>Revenue Accounting Division</b> <b>Bankruptcy Section</b> <b>P O Box 12548</b> <b>Austin, TX 78711-2548</b> Date or dates debt was incurred <b>March/April 2018 Sales Tax</b> Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8) _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b> <b>\$0.00</b>

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

	Amount of claim
<b>3.1</b> Nonpriority creditor's name and mailing address <b>A &amp; C PLASTICS</b> <b>6135 NORTHDAL</b> <b>HOUSTON, TX 77087-5034</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <b>\$5,642.00</b>
<b>3.2</b> Nonpriority creditor's name and mailing address <b>A.A.G. STUCCHI NORTH AMERICA</b> <b>5080 NORTH ROYAL ATLANTA DRIVE</b> <b>TUCKER, GA 30084</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <b>\$1,770.00</b>

Debtor XtraLight Manufacturing, Ltd.  
NameCase number (if known) 18-31857-H1-11

3.3	Nonpriority creditor's name and mailing address AARON DANIEL GADD c/o ADAM J SHAFRAN RUDOLPH FRIEDMANN LLP 92 STATE STREET BOSTON, MA 02109 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>WAGE CLAIM LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.4	Nonpriority creditor's name and mailing address ABATIX CORP. PO BOX 671202 DALLAS, TX 75267-1202 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$297.73
3.5	Nonpriority creditor's name and mailing address ALKOTE INC. 13 FARRELL ST. HOUSTON, TX 77022 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$648.00
3.6	Nonpriority creditor's name and mailing address ALL AMERICAN GASKET 291 HOWARD STREET BROCKTON, MA 02302 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,843.79
3.7	Nonpriority creditor's name and mailing address ALLIED ELECTRONICS INC. 7151 JACK NEWELL BLVD. S FORT WORTH, TX 76118 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$166.37
3.8	Nonpriority creditor's name and mailing address ALMECO USA 1610 SPECTRUM DR. LAWRENCEVILLE, GA 30043 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <sup>a</sup>	\$42,448.70
3.9	Nonpriority creditor's name and mailing address ALP PO BOX 95023 PALATINE, IL 60095-0023 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$617.76

Debtor XtraLight Manufacturing, Ltd.  
NameCase number (if known) 18-31857-H1-11

3.10	Nonpriority creditor's name and mailing address <b>ANTHONY NORMAN</b> <b>c/o ADAM J SHAFRAN</b> <b>RUDOLPH FRIEDMANN LLP</b> <b>92 STATE STREET</b> <b>BOSTON, MA 02109</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>WAGE CLAIM LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
3.11	Nonpriority creditor's name and mailing address <b>ARROW ELECTRONICS</b> <b>2901 WILCREST, SUITE 120</b> <b>HOUSTON, TX 77042</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$14,920.00</u>
3.12	Nonpriority creditor's name and mailing address <b>BADGER METER</b> <b>BOX 88223</b> <b>MILWAUKEE, WI 53288-0223</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$2,652.87</u>
3.13	Nonpriority creditor's name and mailing address <b>BEST LIGHTING PRODUCTS</b> <b>1213 ETNA PARKWAY</b> <b>PATASKALA, OH 43062</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$7,052.64</u>
3.14	Nonpriority creditor's name and mailing address <b>BLACKLAND PRECISION HARDWARE</b> <b>1700 BRYANT DR., SUITE 208</b> <b>ROUND ROCK, TX 78664-3899</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$596.89</u>
3.15	Nonpriority creditor's name and mailing address <b>BR WELDING SUPPLY, LLC</b> <b>125 THRUWAY PARK</b> <b>BROUSSARD, LA 70518-3602</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$177.27</u>
3.16	Nonpriority creditor's name and mailing address <b>BRIOS MEDIA</b> <b>715 WILDFLOWER RIDGE RD</b> <b>WAKE FOREST, NC 27587</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$10,000.00</u>



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3.17	Nonpriority creditor's name and mailing address <b>CASNER &amp; EDWARDS</b> <b>303 CONGRESS STREET</b> <b>BOSTON, MA 02210</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$59,143.02</u>
3.18	Nonpriority creditor's name and mailing address <b>CHERYL ROBINSON</b> <b>c/o ADAM J SHAFRAN</b> <b>RUDOLPH FRIEDMANN LLP</b> <b>92 STATE STREET</b> <b>BOSTON, MA 02109</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  Basis for the claim: <u>WAGE CLAIM LITIGATION</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
3.19	Nonpriority creditor's name and mailing address <b>CHRISTIAN HOWELL</b> <b>c/o ADAM J SHAFRAN</b> <b>RUDOLPH FRIEDMANN LLP</b> <b>92 STATE STREET</b> <b>BOSTON, MA 02109</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  Basis for the claim: <u>WAGE CLAIM LITIGATION</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
3.20	Nonpriority creditor's name and mailing address <b>COBURN'S WHOLESALE DISTRIBUTORS</b> <b>P O BOX 99001</b> <b>DENHAM SPRINGS, LA 70727</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$695.80</u>
3.21	Nonpriority creditor's name and mailing address <b>CONSOLIDATED METAL PRODUCTS</b> <b>FLACK GLOBAL METALS</b> <b>PO BOX 71785</b> <b>CHICAGO, IL 60694-1785</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,000.00</u>
3.22	Nonpriority creditor's name and mailing address <b>CONSOLIDATED PIPE AND SUPPLY</b> <b>DEPT. 3147</b> <b>PO BOX 2153</b> <b>BIRMINGHAM, AL 35287-3147</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$2,326.06</u>
3.23	Nonpriority creditor's name and mailing address <b>CORPORATE UNICORN LIMITED</b> <b>EDF. COMERCIAL SI TOI J8</b> <b>AVENIDA DA PRAIA GRANDE NO.619</b> <b>MACAU</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$89,828.80</u>

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3.24	Nonpriority creditor's name and mailing address <b>CUSTOM ALUMINUM PRODUCTS, INC.</b> <b>500 DIVISION STREET</b> <b>SOUTH ELGIN, IL 60177</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$8,699.87</b>
<hr/>			
3.25	Nonpriority creditor's name and mailing address <b>D. B. ROBERTS</b> <b>P O BOX 840019</b> <b>DALLAS, TX 75284-0019</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$203.46</b>
<hr/>			
3.26	Nonpriority creditor's name and mailing address <b>DAVID M WENDOWSKI</b> <b>c/o ADAM J SHAFRAN</b> <b>RUDOLPH FRIEDMANN LLP</b> <b>92 STATE STREET</b> <b>BOSTON, MA 02109</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  Basis for the claim: <u>WAGE CLAIM LITIGATION</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
<hr/>			
3.27	Nonpriority creditor's name and mailing address <b>DAYLIGHT TRANSPORT, LLC.</b> <b>PO BOX 93155</b> <b>LONG BEACH, CA 90809</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$264.50</b>
<hr/>			
3.28	Nonpriority creditor's name and mailing address <b>DEL'S PLATING WORKS</b> <b>8736 SCHUMACHER LANE</b> <b>HOUSTON, TX 77063</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$112.00</b>
<hr/>			
3.29	Nonpriority creditor's name and mailing address <b>DERRICK DAVIES</b> <b>c/o ADAM J SHAFRAN</b> <b>RUDOLPH FRIEDMANN LLP</b> <b>92 STATE STREET</b> <b>BOSTON, MA 02109</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  Basis for the claim: <u>WAGE CLAIM LITIGATION</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
<hr/>			
3.30	Nonpriority creditor's name and mailing address <b>DIANN STAFFORD</b> <b>c/o ADAM J SHAFRAN</b> <b>RUDOLPH FRIEDMANN LLP</b> <b>92 STATE STREET</b> <b>BOSTON, MA 02109</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  Basis for the claim: <u>WAGE CLAIM LITIGATION</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>

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3.31	Nonpriority creditor's name and mailing address <b>DIGI-KEY CORPORATION</b> <b>701 BROOKS AVENUE SOUTH</b> <b>THIEF RIVER FALLS, MN 56701</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$3,289.58</u>
3.32	Nonpriority creditor's name and mailing address <b>DREW TAYLOR FRENETTE</b> <b>c/o ADAM J SHAFRAN</b> <b>RUDOLPH FRIEDMANN LLP</b> <b>92 STATE STREET</b> <b>BOSTON, MA 02109</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  Basis for the claim: <u>WAGE CLAIM LITIGATION</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
3.33	Nonpriority creditor's name and mailing address <b>ENCAPSULITE</b> <b>P O BOX 1086</b> <b>ROSENBERG, TX 77471</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$271.00</u>
3.34	Nonpriority creditor's name and mailing address <b>ENGINEERED PRODUCTS CO.</b> <b>5401 SMETANA DRIVE</b> <b>MINNETONKA, MN 55343</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$21.58</u>
3.35	Nonpriority creditor's name and mailing address <b>ESPEN TECHNOLOGY</b> <b>12257 FLORENCE AVENUE</b> <b>SANTA FE SPRINGS, CA 90670</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$6,011.50</u>
3.36	Nonpriority creditor's name and mailing address <b>ESQUIRE WIRE INC.</b> <b>2624 MADISON STREET</b> <b>CLARKSVILLE, TN 37043</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$874.02</u>
3.37	Nonpriority creditor's name and mailing address <b>EXCERGY</b> <b>3773 CHERRY CREEK NORTH DRIVE</b> <b>SUITE 575</b> <b>DENVER, CO 80209</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$8,750.00</u>

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3.38	Nonpriority creditor's name and mailing address <b>FEDEX FREIGHT</b> <b>DEPT CH</b> <b>P O BOX 10306</b> <b>PALATINE, IL 60055-0306</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$321.13</b>
3.39	Nonpriority creditor's name and mailing address <b>FERGUSON ENTERPRISES</b> <b>PO BOX 100286</b> <b>ATLANTA, GA 30384-0286</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$74.10</b>
3.40	Nonpriority creditor's name and mailing address <b>FULHAM CO., INC.</b> <b>PO BOX 845686</b> <b>LOS ANGELES, CA 90084-5686</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,253.05</b>
3.41	Nonpriority creditor's name and mailing address <b>FUTURE ELECTRONICS</b> <b>11451 KATY FRWY</b> <b>SUITE 201</b> <b>HOUSTON, TX 77079</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$229,064.97</b>
3.42	Nonpriority creditor's name and mailing address <b>GE LIGHTING</b> <b>P O BOX 846298</b> <b>DALLAS, TX 75284-6298</b> Date(s) debt was incurred ____ Last 4 digits of account number <u>5800</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$10,306.90</b>
3.43	Nonpriority creditor's name and mailing address <b>GE LIGHTING SOLUTIONS LLC</b> <b>P O BOX 406085</b> <b>ATLANTA, GA 30384-2084</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$57.60</b>
3.44	Nonpriority creditor's name and mailing address <b>GI CIRCUITS, INC.</b> <b>10850 S. WILCREST DRIVE</b> <b>SUITE 100</b> <b>HOUSTON, TX 77099</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$46,727.30</b>

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3.45	Nonpriority creditor's name and mailing address <b>GRAINGER</b> DEPT. 804222032 PO BOX 419267 KANSAS CITY, MO 64141-6267 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$56.00</u>
3.46	Nonpriority creditor's name and mailing address <b>GREEN'S BLUE FLAME GAS CO, INC</b> P O BOX 40423 HOUSTON, TX 77240-0423 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$108.28</u>
3.47	Nonpriority creditor's name and mailing address <b>GRIPPLE</b> 1611 EMILY LANE AURORA, IL 60502 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,097.42</u>
3.48	Nonpriority creditor's name and mailing address <b>HERBERT WILKINSON</b> c/o ADAM J SHAFRAN RUDOLPH FRIEDMANN LLP 92 STATE STREET BOSTON, MA 02109 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>WAGE CLAIM LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
3.49	Nonpriority creditor's name and mailing address <b>IDEAL INDUSTRIES, INC.</b> P O BOX 92803 CHICAGO, IL 60675-2803 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$2,120.50</u>
3.50	Nonpriority creditor's name and mailing address <b>ILLUMINATION CASUALTY CORP</b> 8812 FREY ROAD HOUSTON, TX 77034 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Pro rata premiums for 3 months (estimate)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$94,350.00</u>
3.51	Nonpriority creditor's name and mailing address <b>ILLUMINATION CASUALTY CORP</b> 8812 FREY ROAD HOUSTON, TX 77034 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,650,000.00</u>

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3.52	Nonpriority creditor's name and mailing address <b>ILLUMINATION CASUALTY CORP</b> <b>8812 FREY ROAD</b> <b>HOUSTON, TX 77034</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Loan</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,200,000.00</u>
3.53	Nonpriority creditor's name and mailing address <b>INTEGRITY PLUMBING</b> <b>12018 REATA</b> <b>RICHMOND, TX 77469</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$18,620.00</u>
3.54	Nonpriority creditor's name and mailing address <b>INTERTEK TESTING SERVICES</b> <b>P.O. BOX 405176</b> <b>ATLANTA, GA 30384-5176</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$3,400.00</u>
3.55	Nonpriority creditor's name and mailing address <b>INVENTRONICS USA, INC.</b> <b>2825 S. TULSA AVENUE</b> <b>OKLAHOMA CITY, OK 73108</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$8,346.87</u>
3.56	Nonpriority creditor's name and mailing address <b>IOTA ENGINEERING CO.</b> <b>P O BOX 11846</b> <b>TUCSON, AZ 85734</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$48.00</u>
3.57	Nonpriority creditor's name and mailing address <b>ISRAEL APONTE</b> <b>c/o ADAM J SHAFRAN</b> <b>RUDOLPH FRIEDMANN LLP</b> <b>92 STATE STREET</b> <b>BOSTON, MA 02109</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  Basis for the claim: <u>WAGE CLAIM LITIGATION - CLAIM AMOUNT IS INCLUSIVE OF ALL CLAIMANTS IN THE LITIGATION.</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$12,000,000.00</u>
3.58	Nonpriority creditor's name and mailing address <b>JACK ROSE</b> <b>c/o ADAM J SHAFRAN</b> <b>RUDOLPH FRIEDMANN LLP</b> <b>92 STATE STREET</b> <b>BOSTON, MA 02109</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  Basis for the claim: <u>WAGE CLAIM LITIGATION</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>



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<div style="border: 1px solid black; padding: 2px; width: 50px; float: left;">3.59</div> <div style="clear: both;"></div> <p>Nonpriority creditor's name and mailing address  <b>JACYN NORFLEET</b>  <b>c/o ADAM J SHAFRAN</b>  <b>RUDOLPH FRIEDMANN LLP</b>  <b>92 STATE STREET</b>  <b>BOSTON, MA 02109</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent</p> <p><input checked="" type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>WAGE CLAIM LITIGATION</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><u><b>Unknown</b></u></p>
<div style="border: 1px solid black; padding: 2px; width: 50px; float: left;">3.60</div> <div style="clear: both;"></div> <p>Nonpriority creditor's name and mailing address  <b>JAMIL GIMENEZ</b>  <b>c/o ADAM J SHAFRAN</b>  <b>RUDOLPH FRIEDMANN LLP</b>  <b>92 STATE STREET</b>  <b>BOSTON, MA 02109</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent</p> <p><input checked="" type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>WAGE CLAIM LITIGATION</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><u><b>Unknown</b></u></p>
<div style="border: 1px solid black; padding: 2px; width: 50px; float: left;">3.61</div> <div style="clear: both;"></div> <p>Nonpriority creditor's name and mailing address  <b>JAY LEVEY</b>  <b>c/o ADAM J SHAFRAN</b>  <b>RUDOLPH FRIEDMANN LLP</b>  <b>92 STATE STREET</b>  <b>BOSTON, MA 02109</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent</p> <p><input checked="" type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>WAGE CLAIM LITIGATION</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><u><b>Unknown</b></u></p>
<div style="border: 1px solid black; padding: 2px; width: 50px; float: left;">3.62</div> <div style="clear: both;"></div> <p>Nonpriority creditor's name and mailing address  <b>JEREMY A GONSALVES</b>  <b>c/o ADAM J SHAFRAN</b>  <b>RUDOLPH FRIEDMANN LLP</b>  <b>92 STATE STREET</b>  <b>BOSTON, MA 02109</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent</p> <p><input checked="" type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>WAGE CLAIM LITIGATION</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><u><b>Unknown</b></u></p>
<div style="border: 1px solid black; padding: 2px; width: 50px; float: left;">3.63</div> <div style="clear: both;"></div> <p>Nonpriority creditor's name and mailing address  <b>JERRY CAROOM</b>  <b>8812 FREY ROAD</b>  <b>HOUSTON, TX 77034</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent</p> <p><input checked="" type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Equipment Lease - 2015 Bentley, 2013 Bentley, 2017 MB E300</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><u><b>\$0.00</b></u></p>
<div style="border: 1px solid black; padding: 2px; width: 50px; float: left;">3.64</div> <div style="clear: both;"></div> <p>Nonpriority creditor's name and mailing address  <b>JERRY CAROOM</b>  <b>D/B/A XTRALIGHT SERVICES</b>  <b>8812 FREY ROAD</b>  <b>HOUSTON, TX 77034</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Affiliate</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><u><b>\$893,930.45</b></u></p>

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3.65	Nonpriority creditor's name and mailing address JOHN MARCO RAMOS c/o ADAM J SHAFRAN RUDOLPH FRIEDMANN LLP 92 STATE STREET BOSTON, MA 02109 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>WAGE CLAIM LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
3.66	Nonpriority creditor's name and mailing address JOSEPH MANUEL AZEVEDO c/o ADAM J SHAFRAN RUDOLPH FRIEDMANN LLP 92 STATE STREET BOSTON, MA 02109 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>WAGE CLAIM LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
3.67	Nonpriority creditor's name and mailing address JULIAN JOSEPH AZEVEDO c/o ADAM J SHAFRAN RUDOLPH FRIEDMANN LLP 92 STATE STREET BOSTON, MA 02109 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>WAGE CLAIM LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
3.68	Nonpriority creditor's name and mailing address JULIAN P AZEVEDO c/o ADAM J SHAFRAN RUDOLPH FRIEDMANN LLP 92 STATE STREET BOSTON, MA 02109 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>WAGE CLAIM LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
3.69	Nonpriority creditor's name and mailing address KEELING COMPANY 6615 THEALL RD HOUSTON, TX 77066 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$93,285.12</u>
3.70	Nonpriority creditor's name and mailing address KENTWOOD SPRINGS P O BOX 660579 DALLAS, TX 75266-0579 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$103.33</u>
3.71	Nonpriority creditor's name and mailing address KLARO SOLUTIONS, INC 9614 TREE TOPS LAKE ROAD TAMPA, FL 33626 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$4,791.35</u>

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3.72	Nonpriority creditor's name and mailing address KYLE CHEVALIER c/o ADAM J SHAFRAN RUDOLPH FRIEDMANN LLP 92 STATE STREET BOSTON, MA 02109 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>WAGE CLAIM LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.73	Nonpriority creditor's name and mailing address LEGACY PAPER & PACKAGING 15550 VICKERY DRIVE # 150 HOUSTON, TX 77032 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,320.18
3.74	Nonpriority creditor's name and mailing address LEVITON MFG DEPT #05510 P O BOX 405362 ATLANTA, GA 30384-5362 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,452.39
3.75	Nonpriority creditor's name and mailing address LINO GRACE c/o ADAM J SHAFRAN RUDOLPH FRIEDMANN LLP 92 STATE STREET BOSTON, MA 02109 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>WAGE CLAIM LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.76	Nonpriority creditor's name and mailing address LUTRON ELECTRONICS CO., INC. P O BOX 643782 PITTSBURGH, PA 15264-3782 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,500.00
3.77	Nonpriority creditor's name and mailing address MANUEL AZEVEDO c/o ADAM J SHAFRAN RUDOLPH FRIEDMANN LLP 92 STATE STREET BOSTON, MA 02109 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>WAGE CLAIM LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.78	Nonpriority creditor's name and mailing address MARTIN THOMAS FORHAN c/o ADAM J SHAFRAN RUDOLPH FRIEDMANN LLP 92 STATE STREET BOSTON, MA 02109 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>WAGE CLAIM LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown

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<div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">3.79</div> Nonpriority creditor's name and mailing address <b>MATTHEW LISOWSKI</b> <b>c/o ADAM J SHAFRAN</b> <b>RUDOLPH FRIEDMANN LLP</b> <b>92 STATE STREET</b> <b>BOSTON, MA 02109</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>WAGE CLAIM LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
<div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">3.80</div> Nonpriority creditor's name and mailing address <b>MCMMASTER-CARR SUPPLY CO.</b> <b>P O BOX 7690</b> <b>CHICAGO, IL 60680-7690</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,047.77</u>
<div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">3.81</div> Nonpriority creditor's name and mailing address <b>MISUMI USA</b> <b>26797 NETWORK PLACE</b> <b>CHICAGO, IL 60673-1267</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$136.80</u>
<div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">3.82</div> Nonpriority creditor's name and mailing address <b>MOBILE DEMAND</b> <b>1501 BOYSON SQUARE DRIVE</b> <b>HLAWATHA, IA 52233</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$75.00</u>
<div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">3.83</div> Nonpriority creditor's name and mailing address <b>MOBILE FASTENERS</b> <b>P O BOX 897</b> <b>S HOUSTON, TX 77587</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$110.42</u>
<div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">3.84</div> Nonpriority creditor's name and mailing address <b>MOBILE MODULAR PORTABLE STORAGE</b> <b>4445 EAST SAM HOUSTON PKWY S</b> <b>PASADENA, TX 77505</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>
<div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">3.85</div> Nonpriority creditor's name and mailing address <b>MOUSER ELECTRONICS</b> <b>P.O. BOX 99319</b> <b>FORT WORTH, TX 76199-0319</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$2,284.00</u>

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3.86	Nonpriority creditor's name and mailing address <b>MSC INDUSTRIAL SUPPLY CO. INC.</b> <b>PO BOX 953635</b> <b>ST LOUIS, MO 63195-3635</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$302.03</b>
3.87	Nonpriority creditor's name and mailing address <b>MUSTANG DELIVERY SERVICES</b> <b>PO BOX 70090</b> <b>HOUSTON, TX 77270</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$674.81</b>
3.88	Nonpriority creditor's name and mailing address <b>NATANAEL ARAGON-MARTINEZ</b> <b>c/o ADAM J SHAFRAN</b> <b>RUDOLPH FRIEDMANN LLP</b> <b>92 STATE STREET</b> <b>BOSTON, MA 02109</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>WAGE CLAIM LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
3.89	Nonpriority creditor's name and mailing address <b>NEWARK/element14</b> <b>33190 COLLECTION CENTER DRIVE</b> <b>CHICAGO, IL 60693-0331</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$503.76</b>
3.90	Nonpriority creditor's name and mailing address <b>PACIFIC DIE CAST</b> <b>P O BOX 369</b> <b>OLDSMAR, FL 34677</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$78.22</b>
3.91	Nonpriority creditor's name and mailing address <b>PEXCO, LLC - PHILADELPHIA</b> <b>P O BOX 532180</b> <b>ATLANTA, GA 30353-2180</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$15,419.52</b>
3.92	Nonpriority creditor's name and mailing address <b>PHILIPS LIGHTING</b> <b>P O BOX 100194</b> <b>ATLANTA, GA 30384</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$7,606.28</b>

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3.93	Nonpriority creditor's name and mailing address <b>PHILIPS LIGHTING ELECTRONICS</b> <b>PO BOX 100332</b> <b>ATLANTA, GA 30384-0978</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,468.00</b>
<hr/>			
3.94	Nonpriority creditor's name and mailing address <b>PHILIPS LIGHTING ELECTRONICS</b> <b>PO BOX 100332</b> <b>ATLANTA, GA 30384-0978</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$35,600.00</b>
<hr/>			
3.95	Nonpriority creditor's name and mailing address <b>PRAXAIR DISTRIBUTION, INC.</b> <b>PO BOX 120812</b> <b>DEPT 0812</b> <b>DALLAS, TX 75312-0812</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$737.95</b>
<hr/>			
3.96	Nonpriority creditor's name and mailing address <b>PRECISION MULTIPLE CONTROLS</b> <b>33 GREENWOOD AVE.</b> <b>MIDLAND PARK, NJ 07432</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$890.00</b>
<hr/>			
3.97	Nonpriority creditor's name and mailing address <b>PROTO LABS, INC.</b> <b>5540 PIONEER CREEK DR.</b> <b>MAPLE PLAIN, MN 55359</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,626.34</b>
<hr/>			
3.98	Nonpriority creditor's name and mailing address <b>PSI INDUSTRIES</b> <b>2301 YALE BLVD SE., STE C-4</b> <b>ALBUQUERQUE, NM 87106</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$24.22</b>
<hr/>			
3.99	Nonpriority creditor's name and mailing address <b>QUILL CORPORATION</b> <b>P.O BOX 37600</b> <b>PHILADELPHIA, PA 19101</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$229.91</b>

Debtor XtraLight Manufacturing, Ltd.  
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3.100	Nonpriority creditor's name and mailing address <b>RELiance METAL CENTER DIV 07</b> <b>PO BOX 843525</b> <b>DALLAS, TX 75284-3525</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$165.00</u>
3.101	Nonpriority creditor's name and mailing address <b>SANDEE MANUFACTURING</b> <b>10520 WAVELAND AVENUE</b> <b>FRANKLIN PARK, IL 60131</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$9,242.00</u>
3.102	Nonpriority creditor's name and mailing address <b>SCIENTIFIC LIGHTING PRODUCTS</b> <b>P O BOX 840116</b> <b>KANSAS CITY, MO 64184-0116</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,049.85</u>
3.103	Nonpriority creditor's name and mailing address <b>SMART ELECTRIC NORTH AMERICA</b> <b>PO BOX 427</b> <b>CONOVER, NC 28613</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$597.50</u>
3.104	Nonpriority creditor's name and mailing address <b>SOUTHEASTERN FREIGHT LINES</b> <b>P O BOX 100104</b> <b>COLUMBIA, SC 29202-3104</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$848.31</u>
3.105	Nonpriority creditor's name and mailing address <b>SOUTHERN AMERICAN INSURANCE</b> <b>AGENCY</b> <b>13823 SCHMIDT ROAD</b> <b>CYPRESS, TX 77429</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>
3.106	Nonpriority creditor's name and mailing address <b>SOUTHERN CONTAINER LTD.</b> <b>10410 PAPALOTE ST.</b> <b>SUITE 130</b> <b>HOUSTON, TX 77041</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$2,353.36</u>



Debtor XtraLight Manufacturing, Ltd.  
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3.107	Nonpriority creditor's name and mailing address <b>SOUTHERN PIPE &amp; SUPPLY CO., INC.</b> <b>PO BOX 3582</b> <b>LAFAYETTE, LA 70502</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$3,781.66</u>
3.108	Nonpriority creditor's name and mailing address <b>SOUTHERN PRODUCT FINISHING</b> <b>P O BOX 895</b> <b>PEARLAND, TX 77588-0895</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$2,038.50</u>
3.109	Nonpriority creditor's name and mailing address <b>STRICTLY ELECTRICAL SOLUTIONS, LLC</b> <b>3603 COFFEE</b> <b>PASADENA, TX 77505</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$15,000.00</u>
3.110	Nonpriority creditor's name and mailing address <b>SUPER ROOTER INC.</b> <b>302 SE WALLACE TERR</b> <b>PORT ST LUCIE, FL 34983</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$15,000.00</u>
3.111	Nonpriority creditor's name and mailing address <b>THE WATT STOPPER, INC.</b> <b>PO BOX 3160</b> <b>CAROL STREAM, IL 60132-3160</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$2,262.00</u>
3.112	Nonpriority creditor's name and mailing address <b>THOMAS J GAMBLE</b> <b>c/o ADAM J SHAFRAN</b> <b>RUDOLPH FRIEDMANN LLP</b> <b>92 STATE STREET</b> <b>BOSTON, MA 02109</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  Basis for the claim: <u>WAGE CLAIM LITIGATION</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
3.113	Nonpriority creditor's name and mailing address <b>TIME WARNER CABLE</b> <b>PO BOX 70872</b> <b>CHARLOTTE, NC 28272-0872</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$199.99</u>

Debtor XtraLight Manufacturing, Ltd.  
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<div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">3.114</div> Nonpriority creditor's name and mailing address <b>TIMOTHY GREENWELL</b> <b>c/o ADAM J SHAFRAN</b> <b>RUDOLPH FRIEDMANN LLP</b> <b>92 STATE STREET</b> <b>BOSTON, MA 02109</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>WAGE CLAIM LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
<div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">3.115</div> Nonpriority creditor's name and mailing address <b>UNIVERSAL LIGHTING TECHNOLOGIE</b> <b>P O BOX 405128</b> <b>ATLANTA, GA 30384-5128</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$267.50</u>
<div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">3.116</div> Nonpriority creditor's name and mailing address <b>WARRANTY RESERVE CLAIMS</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>
<div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">3.117</div> Nonpriority creditor's name and mailing address <b>WATER ENERGY</b> <b>ACCOUNTS PAYABLE</b> <b>9741 TAPPENBECK DRIVE</b> <b>HOUSTON, TX 77055</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$18,187.00</u>
<div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">3.118</div> Nonpriority creditor's name and mailing address <b>WHOLESALE ELECTRIC SUPPLY</b> <b>PO BOX 732778</b> <b>DALLAS, TX 75373-2778</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,055.38</u>
<div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">3.119</div> Nonpriority creditor's name and mailing address <b>WILLIAM H BOUSHELL</b> <b>c/o ADAM J SHAFRAN</b> <b>RUDOLPH FRIEDMANN LLP</b> <b>92 STATE STREET</b> <b>BOSTON, MA 02109</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>WAGE CLAIM LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
<div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">3.120</div> Nonpriority creditor's name and mailing address <b>YRC (RDWY)</b> <b>P O BOX 730375</b> <b>DALLAS, TX 75373-0375</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,149.75</u>

**Part 3: List Others to Be Notified About Unsecured Claims**

Debtor XtraLight Manufacturing, Ltd.  
NameCase number (if known) 18-31857-H1-11

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address

On which line in Part 1 or Part 2 is the  
related creditor (if any) listed?Last 4 digits of  
account number, if  
any**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2  
Lines 5a + 5b = 5c.

		Total of claim amounts	
5a.	\$		0.00
5b.	+	\$	16,681,672.98
5c.	\$		16,681,672.98

**Fill in this information to identify the case:**Debtor name XtraLight Manufacturing, Ltd.United States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXASCase number (if known) 18-31857-H1-11☐ Check if this is an amended filing**Official Form 206G****Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

**1. Does the debtor have any executory contracts or unexpired leases?**☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B).*Property***2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1. State what the contract or lease is for and the nature of the debtor's interest

State the term remaining Month to Month

List the contract number of any government contract \_\_\_\_\_

All Cleaning Services2.2. State what the contract or lease is for and the nature of the debtor's interest Sales Representation Agreement

State the term remaining \_\_\_\_\_

List the contract number of any government contract \_\_\_\_\_

Allen Kirk  
8812 Frey Road  
Houston, TX 770342.3. State what the contract or lease is for and the nature of the debtor's interest Master Service Agreement

State the term remaining \_\_\_\_\_

List the contract number of any government contract \_\_\_\_\_

Birch  
320 Interstate North Parkway SE  
Atlanta, GA 30339

Debtor 1 **XtraLight Manufacturing, Ltd.**

First Name

Middle Name

Last Name

Case number (if known) **18-31857-H1-11****Additional Page if You Have More Contracts or Leases****2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.4. State what the contract or lease is for and the nature of the debtor's interest

**Rental/Lease Agreement dated January 1, 2012 between Cay Capital as owner and XtraLight Manufacturing Partnership, Ltd. n/k/a XtraLight Manufacturing Ltd. as Tenant, for property and buildings located at 8812 Frey Road, Houston, TX 77034, at \$34,000 per month. Terminates upon 30 days written notice.**

State the term remaining

List the contract number of any government contract

**Cay Capital LLC  
8812 Frey Road  
Houston, TX 77034**

2.5. State what the contract or lease is for and the nature of the debtor's interest

**Commercial Lease for property located at 1117 E. Thomas Street, Hammond, Louisiana.**

State the term remaining

List the contract number of any government contract

**Chief Investments, LLC  
Attn Nicholas J Muscarello  
105 Abingdon Way  
Hammond, LA 70401**

2.6. State what the contract or lease is for and the nature of the debtor's interest

**Sales Representation Agreement**

State the term remaining

List the contract number of any government contract

**Cody Hayes  
8812 Frey Road  
Houston, TX 77034**

2.7. State what the contract or lease is for and the nature of the debtor's interest

**Equipment Lease effective 8/1/2016 between Jerry Caroom as Lessor and XtraLight for 60 payments of \$9,170.44. 39 months**

State the term remaining

List the contract number of any government contract

**Jerry Caroom  
8812 Frey Road  
Houston, TX 77034**

Debtor 1 **XtraLight Manufacturing, Ltd.**

First Name

Middle Name

Last Name

Case number (if known) **18-31857-H1-11****Additional Page if You Have More Contracts or Leases****2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

- 2.8. State what the contract or lease is for and the nature of the debtor's interest **Sales Representation Agreement**

State the term remaining

List the contract number of any government contract

**Jerry Caroom**  
**8812 Frey Road**  
**Houston, TX 77034**

- 2.9. State what the contract or lease is for and the nature of the debtor's interest **Sales Representation Agreement**

State the term remaining

List the contract number of any government contract

**Joe Thomson**  
**8812 Frey Road**  
**Houston, TX 77034**

- 2.10. State what the contract or lease is for and the nature of the debtor's interest

State the term remaining **Month to Month**

List the contract number of any government contract

**Kentwood/Crystal Springs**

- 2.11. State what the contract or lease is for and the nature of the debtor's interest **Sales Representation Agreement**

State the term remaining

List the contract number of any government contract

**Lisa Swienton**  
**8812 Frey Road**  
**Houston, TX 77034**

- 2.12. State what the contract or lease is for and the nature of the debtor's interest **Sales Representation Agreement**

State the term remaining

List the contract number of any government contract

**Mike Mayer**  
**8812 Frey Road**  
**Houston, TX 77034**

- 2.13. State what the contract or lease is for and the nature of the debtor's interest

State the term remaining **Month to Month**

List the contract number of any

**NTS Communications**  
**P O Box 10730**  
**Lubbock, TX 79408-3730**

Debtor 1 **XtraLight Manufacturing, Ltd.**

First Name

Middle Name

Last Name

Case number (if known) **18-31857-H1-11****Additional Page if You Have More Contracts or Leases****2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

government contract

2.14. State what the contract or lease is for and the nature of the debtor's interest

Payroll Service Agreement dated 3/14/2014, Employer Service Agreement, COBRA Services Agreement, Full Service Garnishment Support Services Agreement

State the term remaining

List the contract number of any government contract

Paycom Payroll, LLC  
d/b/a PAYCOM  
7501 W Memorial Rd  
Oklahoma City, OK 73142

2.15. State what the contract or lease is for and the nature of the debtor's interest

Lease Agreement

State the term remaining

List the contract number of any government contract

October 2018

Pitney Bowes  
3001 Summer Street  
Stamford, CT 06926

2.16. State what the contract or lease is for and the nature of the debtor's interest

Lease

State the term remaining

List the contract number of any government contract

9/30/2018

Preferred Corporate Housing  
Estates at Eagle's Point  
36062 Beale Court  
Peru, IN 46970

2.17. State what the contract or lease is for and the nature of the debtor's interest

Leases - 2 corporate housing

State the term remaining

List the contract number of any government contract

7/01/2018

Preferred Corporate Housing  
The Avenue at Nicholasville  
801 E Brannon Road  
Nicholasville, KY 40356

2.18. State what the contract or lease is for and the nature of the debtor's interest

Sales Representation Agreement

State the term remaining

List the contract number of any government contract

Richard Shirley  
8812 Frey Road  
Houston, TX 77034



Debtor 1 **XtraLight Manufacturing, Ltd.**

First Name

Middle Name

Last Name

Case number (if known) **18-31857-H1-11****Additional Page if You Have More Contracts or Leases****2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

- 2.19. State what the contract or lease is for and the nature of the debtor's interest **Sales Representation Agreement**

State the term remaining

List the contract number of any government contract

**Ron Gilcrease  
8812 Frey Road  
Houston, TX 77034**

- 2.20. State what the contract or lease is for and the nature of the debtor's interest **Employment Agreements**

State the term remaining

List the contract number of any government contract

**See attached Exhibit G-1 for Employees**

- 2.21. State what the contract or lease is for and the nature of the debtor's interest **Service Agreement**

State the term remaining

**December 2018**

List the contract number of any government contract

**Southeast Business Systems  
202 Market St  
Hammond, LA 70401**

- 2.22. State what the contract or lease is for and the nature of the debtor's interest **Marketing Agreement**

State the term remaining

List the contract number of any government contract

**Statesman Business Advisors  
1900 West Loop S  
Houston, TX 77056**

- 2.23. State what the contract or lease is for and the nature of the debtor's interest **Service Agreement**

State the term remaining

**Month to Month**

List the contract number of any government contract

**Tiger Shredding  
6307 Quinn Drive  
Baton Rouge, LA 70817**

- 2.24. State what the contract or lease is for and the nature of the debtor's interest **Occupancy Agreement Term Sheet**

State the term remaining

**9/21/2018**

**Travelers Haven  
5115 North Socrum Loop Road  
Lakeland, FL 33809**

Debtor 1 **XtraLight Manufacturing, Ltd.**

First Name

Middle Name

Last Name

Case number (if known) **18-31857-H1-11****Additional Page if You Have More Contracts or Leases****2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

List the contract number of any government contract \_\_\_\_\_

2.25. State what the contract or lease is for and the nature of the debtor's interest      **Occupancy Agreement Term Sheet**

State the term remaining      **9/05/2018**

List the contract number of any government contract \_\_\_\_\_

**Travelers Haven  
7816 Mayfaire Crest Lane  
Raleigh, NC 27615**

2.26. State what the contract or lease is for and the nature of the debtor's interest      **Occupancy Agreement Term Sheet**

State the term remaining      **9/14/2018**

List the contract number of any government contract \_\_\_\_\_

**Travelers Haven  
4740 West Atlantic Blvd.  
Pompano Beach, FL 33063**

2.27. State what the contract or lease is for and the nature of the debtor's interest      **Lease Agreement with Utility Metering Solutions for premises located at 7200 Falls of Neuse Road, Raleigh, NC 27615, consisting of 26,280 rentable square feet.**

State the term remaining      **April 30, 2019**

List the contract number of any government contract \_\_\_\_\_

**Urban Properties 1, LLC and  
4318 Medical Park Drive, LLC  
c/o Urban Commercial Properties  
7200 Falls of Neuse Road, Suite 303  
Raleigh, NC 27615**

2.28. State what the contract or lease is for and the nature of the debtor's interest      **Customer Contracts**

State the term remaining

List the contract number of any government contract \_\_\_\_\_

**Xtralight Manufacturing Ltd.  
d/b/a Uitlity Metering Solutions**

**XtraLight Manufacturing, Ltd.**  
**EXHIBIT G-1 Employee Contracts**

LINDSAY ANZALONE  
MICHAEL D ARNOLD  
JOSEPH BADERA  
ASHLEY BARADO  
SARA BARDWELL  
BENJAMIN BERTENS  
CALVIN BROWN  
ADAM M CARROLL  
COALTER CURRAN  
BLAKE A DAVIS  
LANCE DAVIS  
ASHLEY FRANCIS  
RONALD GILCREASE  
CODY HAYES  
ANA V HERNANDEZ  
ANTHONY HUME  
VYOMARK JOSHI  
WILL KIDDER  
LINCOLN KILPATRICK  
RITA E KIMBRELL  
NORMAN KIRBY  
ALLEN KIRK  
THOMAS W LANDRY  
ADRIANNE LATTIMORE  
KASEY LENCH  
DAVID A LUTHER  
MICHAEL MAYER  
KENNETH M MCALPIN  
GREGORY MCCALLA  
BARRY MELVIN  
JOEY A MITCHELL  
MARITZA J MORALES  
DAVID NAPIER  
PAUL FRANK OLAH  
JENNA ONEILL  
HARRY L PATERSON  
ROBERT PATTERSON  
MICHAEL RENNER  
KIMBERLY RENNER  
JAMES WILLIAM RICE  
RICHARD K SHIRLEY  
JAVIER SILVA LUCIO  
JAMES E SMITH

RICHARD SPENCER  
LAWRENCE P STRYK  
DONNA SWIENTON  
RUSSELL SWITZER  
JOSEPH THOMSON  
HEATHER THRIFT  
AMULYA VEGESNA  
ANNA VIEBAG  
KRISTINA WOODRUFF  
NIKAI ZHANG  
STEPHEN M ZOZULA

**Fill in this information to identify the case:**Debtor name XtraLight Manufacturing, Ltd.United States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXASCase number (if known) 18-31857-H1-11☐ Check if this is an amended filing**Official Form 206H  
Schedule H: Your Codebtors**

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

**1. Do you have any codebtors?**☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

*Column 1: Codebtor**Column 2: Creditor*

	<b>Name</b>	<b>Mailing Address</b>	<b>Name</b>	<i>Check all schedules that apply:</i>
2.1	JERRY H CAROOM	D/B/A X-TRA LIGHT SERVICES 8812 FREY ROAD HOUSTON, TX 77034	BBVA COMPASS BANK	<input checked="" type="checkbox"/> D <u>2.5</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____

**Fill in this information to identify the case:**Debtor name XtraLight Manufacturing, Ltd.United States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXASCase number (if known) 18-31857-H1-11☐ Check if this is an amended filing

## Official Form 202

**Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

**WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**

**Declaration and signature**

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets--Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ Amended Schedule
- ☐ Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders (Official Form 204)
- ☐ Other document that requires a declaration

I declare under penalty of perjury that the foregoing is true and correct.

Executed on April 11, 2018

X

Signature of individual signing on behalf of debtor

Jerry Caroom

Printed name

President and Manager of XLM Management, LLC, Debtor's General Partner

Position or relationship to debtor